**Funding Application**

Email application and supporting documents to: [wimala.treasurer@sa.uca.org.au](mailto:wimala.treasurer@sa.uca.org.au)

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| **APPLICANT** *(Congregation OR Faith Community)* | | | | | | | | |
| **Congregation Name:** |  | | | | | | | |
| **Contact Name:** |  | | | | | | | |
| **Address:** |  | | | | | | | |
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|  |  | | | | | | | |
| **Email address:** |  | | | | | | | |
| **Phone:** | Work: | | Mobile: | | | Other: | | |
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| **PROJECT NAME** | | | | | | | | |
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| **DESCRIBE PROJECT IN DETAIL** | | | | | | | | |
| If there is insufficient space, please attach a sheet with further details. | | | | | | | | |
| **REASON FOR GRANT REQUEST** | | | | | | | | |
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| **FUNDING FOR PROJECT** | | | | | | | | |
| The project is expected to take       months at a total cost of $ | | | | | | | | |
| **Presbytery funding requested** | | $ | | Commencing | date | | | |
| Self-funding component | | $ | |  |  | | | |
| Other funding being sought | | $ | | From where? |  | | | |
| *Total* | | $ | |  | | | | |
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| **COMPONENT COSTS OF PROJECT** *(list all major cost components)* | | | | | | |
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| **MISSION PLAN** (of Applicant’s Church or Church Organisation) | | | | | | | | |
| Is this project in accord with your organisation’s Mission or Business Plan? Yes  No  Indicate Yes or No and give the reasons for your answer. | | | | | | | | |
| \*Attach a copy of the relevant plan if applicable. | | | | | | | | |
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| **OBJECTIVES / OUTCOMES**  List the anticipated objectives and outcomes from this project, who will benefit and how. Attach extra page if needed. | | | | | | | | |
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| **APPLICATION SIGNATURES** | | | | | | | | |
| **Signature of Contact Person**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_  **Signature of Church Council Secretary**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_ | | | | | | |
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| **WIMALA PRESBYTERY USE ONLY** | |
| Specialist area report. (e.g. Pastoral Relations, Regional Hub, Property, other) |

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| **PRESBYTERY RECOMMENDATION** | |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_ |