

Village Presbyterian Church

Missions Committee

Grant Application Cover Sheet

Funding Guidelines for Local Outreach:

Projects funded through the Mission Committee should demonstrate a meaningful human service and minister to those who are least able to help themselves. They should be of a community nature where it is natural for Village Church to assume a portion of the responsibility.

Projects should meet the following criteria:

- *Be local in nature (metropolitan Kansas City)
- *Be associated with an organization with 501c(3) status
- *Not duplicate services already provided in the same area
- *Demonstrate potentially significant impact/outcomes
- *Demonstrate cost effectiveness

Preference will be given to projects where the Village Church contribution represents a response to a unique need (rather than providing ongoing core support to the organization). In general, the Mission Committee does not fund requests greater than \$5,000.

The Missions Committee grant application review process: When your application is received in the Missions Office, it is reviewed for completeness. It is then assigned to the first possible month for study by the Screening Subcommittee. This subcommittee determines if a recommendation for a site visit should be made. If your request is recommended for a site visit, the convener of a small group of two or more committee members will call you to make a site visit appointment. If your agency is chosen for a site visit, we ask that the Board President, Board representatives and the Executive Director be available for the first interview. The site team will make a report about your request and their recommendation about funding to the entire committee.

How to apply:

Please note that incomplete applications are not considered.

1. Submit the original application and five (5) copies. Applications may be copied front and back.
2. Confine all information to the space provided on the application form.
3. Simply staple each application, do not place applications in folders.
4. Do not add a cover page or additional material of any kind or exceed the space provided per question.
5. Submit one (1) copy of each listed documentation.

Required Documentation:

*501c(3) IRS designation letter.

*Current agency Board roster

*Fee schedule, if applicable

*If an annual audit is available, please include a copy with the “required documentation.”

Send original and five (5) copies of application and documentation to:

Roxie Byrne, Missions Department

Village Presbyterian Church

6641 Mission Road

Prairie Village, KS 66208

If you have any questions, please feel free to call Roxie Byrne at 913/671-2340.

**The Village Presbyterian Church
Mission Committee Grant Application**

Date:

PLEASE READ COVER SHEET BEFORE COMPLETING THIS FORM.
Incomplete applications will not be considered.

Agency Name:

Address:

Contact Person:

Telephone:

Title:

Executive Director:

Previous Village Church Missions Committee Funding History:

Year	Grant Amount	Program Name/Description
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Amount Requested	Program Name/ Description
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1. State the overall mission of your agency:

(1)

2. Describe your agency, including history, type of services, number of full/part time staff, volunteer component, geographical area served, number of persons served in an average month.

3. Describe the human need that exists that your agency is responding to:

4. Describe the program for which Village Church mission funds will be used and how they will be used.

5. Is this a proposed or an existing program?

Start date:

6. Describe the people targeted by your program including how they are identified and eligibility criteria used.

7. What is your definition of success of the program and how is success measured?

8. List of other organizations that provide a similar service to the same population. Describe how your program is distinct.

9. Describe any cooperative efforts with other agencies and their program. Please include details of any collaborative use of resources.

10. List all other sources, status and amounts of funding sought for this program in order of amount. (If proposals and pending, please indicate.)

Source	Amount	Purpose	Status
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11. A. If no other funding is being sought for this program, how will it be funded should the Village Church be unable to grant funding assistance?

B. How do you plan to fund this program after this funding year?

12. Explain any significant changes (20%) in next year's revenue or expenditures.
(Refer to the Program and Agency Budget Summaries.)

13. Program and Agency Budget Summaries – Please complete both summaries.

Please attach the Program Budget Summary with all revenue and expenses specific to the program/need for which Community Concern funds are requested. We also need the Agency Budget Summary with revenue and expenses for the total agency for last year and this year.

14. Does this project need support, volunteer or otherwise, in addition to financial help from Village Church? If so, please describe.

Signature of Executive Director: _____

Signature of Board Officer: _____

Date Submitted: _____

AGENCY Budget Summary

AGENCY NAME: _____

PUBLIC SUPPORT & REVENUE – ALL SOURCES	*Budget Last Year 2009	*Actual Last Year 2009	Budget This Year 2010
1. Contributions/Grants			
2. United Way			
3. Fees and Grants from Government Agencies			
4. Membership Dues – Individual			
5. Program Service Fees			
6. Sales of Materials			
7. Investment Income and Gains on Investment Transaction			
8. Other (list below)			
9. Transferred from Restricted Funds			
10. ALLOCATION REQUEST			
11. TOTAL SUPPORT AND REVENUE			
EXPENSES			
12. Salaries			
13. Employee Benefits and Payroll Taxes			
14. Professional Fees			
15. Office Expenses (supplies, phone, etc.)			
16. Occupancy			
17. Travel, Conferences, Conventions and Meetings			
18. Specific Assistance to Individuals			
19. Membership Dues			
20. Other Expenses			
21. Payments to affiliated organizations			
22. Major property and equipment acquisition			
23. TOTAL EXPENSES FOR BUDGET PERIOD			
24. Net Revenue over (under) Expenses			
25. Total Operating Fund Balance at Beginning of Year			

Financial information rounded to nearest dollar.

*When available, copies of audited financials may be provided for this information.

PROGRAM Budget Summary

AGENCY NAME: _____

Program Name: _____

PUBLIC SUPPORT & REVENUE – ALL SOURCES	*Budget Last Year 2009	*Actual Last Year 2009	Budget This Year 2010
1. Contributions/Grants			
2. United Way			
3. Fees and Grants from Government Agencies			
4. Membership Dues – Individual			
5. Program Service Fees			
6. Sales of Materials			
7. Investment Income			
8. Other (list below)			
9. Transferred from Restricted Funds			
10. ALLOCATION REQUEST			
11. TOTAL SUPPORT AND REVENUE			
EXPENSES			
12. Salaries			
13. Employee Benefits and Payroll Taxes			
14. Professional Fees			
15. Office Expenses (supplies, phone, etc.)			
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23. TOTAL EXPENSES FOR BUDGET PERIOD			
24. Net Revenue over (under) Expenses			
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Financial information rounded to nearest dollar.