



**GRANT APPLICATION
CHURCHES - 2020**

Return to: HANDS-ON MISSION GRANTS
Central Florida Presbytery
924 N. Magnolia Avenue, Suite #100
Orlando, FL 32803

1. Name of Church _____
Date Submitted _____ Date Received _____

2. Date of Mission trip: Departing _____ Returning _____
Where are you going: _____

Brief description of Project Partnership including objectives and time frame of project. Do you plan to continue communication with your Partner after the workcamp event? (Use separate sheet)

3. Name of other participating churches or persons: _____

4. How/by whom will orientation or training be provided: _____

5. Have you made provisions for insurance? _____

6. How will host partners participate in the project? _____

7. Who will provide the CD with pictures and narration and/or video for Hands-On Mission Task Force video? (Name & phone #)

Factors that will be taken into account when considering the amount of grant to be awarded include: please indicate your answer:

8. Size of the group: _____

9. Are any youth in the group? _____ How many? _____

10. Is the host organization related to the PCUSA or any current CFP mission efforts? _____
Which ones? _____

11. Have you received a Hands-On Mission Grant in the past? _____ When? _____
How much? _____ Did you supply the Hands-On Mission Task Force with a CD & narrative and/or video? _____

12. Will you be partnering with other PCUSA churches in the CFP? _____ Which ones? _____

13. Will members of other organizations or churches be collaborating with you? _____

14. EXPENSES (for entire group)

Cost of Travel (estimate) _____

Cost of Project Materials (estimate) _____

Cost of Food/Accommodations _____

Miscellaneous _____

Total Cost of Trip (estimate) _____

INCOME

Churches Contribution _____

Fund-raising Efforts _____

Other Grants/Gifts _____

Actual Cost to Individual _____

Total Income _____

SUPPLEMENT REQUESTED FROM PRESBYTERY HANDS-ON COMMITTEE: \$ _____

15. Name, address, phone number of person completing application: _____

16. If approved, the Global Missions Subcommittee will ask for a check to be sent to your church for the amount awarded. To whose attention should the check be sent? _____

Project approved by the Session of: _____ Church,

_____, Florida on _____
(Date)

Clerk of Session

Pastor

Please return filled out applications to the Presbytery Office, attention: Global Mission Grant by March 31st and September 30th.

