

Funding Application Form for Agencies

Christ Lutheran Church Mission Endowment Fund
425 Riverside Rd
Belvidere, IL 61008
815-885-2522
clcelca@makingchristknown.org

GUIDELINES

The Christ Lutheran Church Mission Endowment Fund exists to advance the mission of *Making Christ Known* through responsible stewardship of gifts made to the fund and disbursement of proceeds from the fund done in accordance with the by-laws that govern the fund.

The Christ Lutheran Church Mission Endowment Fund Committee receives applications from persons and organizations, and makes recommendations to the Congregational Council of Christ Lutheran Church for disbursements. The Congregation Council makes all decisions as to the final disbursement of grants from the fund to a qualifying person or organization.

Each application must have a member of Christ Lutheran staff or congregation council member designated as its "sponsor." Project sponsors support the application and are available to explain the impact of the initiative on their area of staff responsibility.

Applications for grants are due the last business day of June by 12:00 noon. They must be submitted by the staff or leadership sponsor to the Mission Endowment Fund Committee for review at its first meeting following the application deadline date. The Mission Endowment Fund Committee will forward recommendations for grants to the Congregational Council for approval. Grants and scholarships awarded by the Mission Endowment Fund will be reported in the Annual Report of the Congregation.

Any party funded must acknowledge the Christ Lutheran Church Mission Endowment Fund for their sponsorship, gift, underwriting, and generosity in making the project possible. This acknowledgement encourages others to contribute to the Mission Endowment Fund and to propose future projects.

For further information or clarification contact the Mission Endowment Fund of Christ Lutheran Church at MissionEndowmentFund@MakingChristKnown.org or the church office.

All items in Sections A, B, and C must be filled out completely:

Section A:

Date of Request: _____

Project Name: _____

Requesting Agency/Institution: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

E-mail Address: _____

CLC Staff or Leadership Sponsor: _____

Amount Requested: _____

Estimated Project Budget:

Please attach itemized budget or fill out Section C.

Section B: Project Narrative

Which category best defines your request?

1. Support the advancement of the mission of the Church (making Christ known) beyond the congregation's normal ministries.
2. Promote health and wholeness in the name of Christ.
3. Equip and empower leadership development in the ELCA or full communion partners.
4. Further partnerships in mission between the congregation and Synodical, Regional and Churchwide expressions of the Evangelical Lutheran Church in America

Brief description of the Project:

How does this project enhance or support the mission of *Making Christ Known*?

Other sources of income that will support this project: _____

Attach or briefly explain a proposed timeline for project: _____

Section C:

Estimated Project Budget: _____

Estimated Date(s) When Funds Are Needed: _____

Detail	Expenses	Requested from CLC MEF	Other funding sources (if applicable)	Total Costs
Total				

Signature _____ Date: _____

Signature of CLC Staff or Leadership Sponsor _____