

SYNOD OF THE PACIFIC PRESBYTERIAN CHURCH (U.S.A.)
MISSION PARTNERSHIP COMMITTEE
OPPORTUNITY GRANT FUND APPLICATION FORM
[This is a 2-page form]

Information to Applicant:

- The Applicant must complete this form and file the same with the Synod office at 200 Kentucky Street, Suite B, Petaluma CA 94952.
- All relevant information and attachments must be supplied. The information on the application for completeness shall be determined by the Synod office staff. No application shall be referred to the Opportunity Grant Fund Administrative Committee for funding consideration unless the application form is completed.
- This form also includes relevant initial routing information which is completed by Synod staff.

FUND AWARD GUIDELINES AND PROCESS

The proposed project must benefit more than one presbytery and be completed within a specified period of time and in compliance with the following award guidelines:

- The duration of the proposed project is not to exceed two (2) years but may include a project that is projected to be self-sustaining thereafter. Grants will be issued for one year with the possibility of renewing the grant for a second year.
- The proposed project is a new and creative endeavor that serves the mission of the Church.
- The proposed project requires the financial support of Synod.
- Funding preference will be given to proposed projects that are facilitated primarily by volunteer labor rather than to fund salaries.

Fund Award Process:

- An application must be submitted on this application form, and it is preferred that an application be filed on or before March 31st; and
- Applicant must provide evidence of substantial compliance with the guidelines of this fund; and
- Applicant must agree to provide evidence of use of the funds semi-annually in accordance with the request; and
- Applicant will be notified by the Synod office of the Opportunity Grant Fund Administrative Committee decision; and
- Distribution of funding for approved applications shall be facilitated by the Synod Central Office.

Applicant Name: _____

Address: _____

Date: _____ **Amount of Requested Funding:** _____ [\$ _____]

Describe project/program for which funding is requested: [attach narrative]

How the funding will be spent: _____

Provide explanation and assurance that the opportunity objective can be accomplished with this requested funding:

Contact information of person in charge of the Opportunity Grant Funding Need:

Name: _____

Address: _____

Phone: _____ Cell: _____

E-mail: _____ Fax: _____

I certify that I am duly authorized by the Applicant and that the information herein contained is true and correct on behalf of the Applicant and that the Applicant agrees to the terms and conditions of this Fund request.

Dated: _____ **Signed:** _____

OFFICIAL USE ONLY: APPLICANT DOES NOT COMPLETE ANYTHING BELOW THIS LINE

All blanks are to be initialed and dated by the appropriate Synod officials. This application Request Process is in chronological order and the stage of the process is evidenced by the official's initials. Synod officials shall not process this Application Request unless all the steps preceding the official's action have been completed on this form.

Completed by Synod Staff:

Application form has been submitted, Application Request form has been reviewed and all information required has been provided, and application is complete: Date: _____ Initialed by Staff _____

Copy of Application form has been provided to the members of the Opportunity Grant Fund Administrative Committee with request for Moderator to set a date for telephone conference call meeting of the Committee. Date: _____ Initialed by Staff. _____

Telephone conference call meeting and application review by Opportunity Grant Fund Administrative Committee: Date: _____ Initialed by Staff. _____

Determination of Opportunity Grant Fund Administrative Committee on application request:
 Denied Granted Granted in part as follows:

Original Application form is retained in the official Records of the Synod of the Pacific by Staff and a copy is provided to applicant, Opportunity Grant Fund Administrative Committee Members and the Mission Partnership Committee. If funded, to appropriate staff for issuance of funds to applicant.

Date: _____ Initialed by Staff. _____