

Community Missional Impact Grant Request Dakotas Conference UMC

To be used throughout <u>2015</u> – *application deadline 12-15-15*

Church Name		-OR-
Dakotas UMC Agency/Organiz	zation/Team	
Mailing Address		
Contact Name	Position	
Contact Phone	Cell	Contact email
If you are a church, have you b	een making regular ap	portionment payments? Y N Unsure
Project type: Check all that apply	mission of mercy /s	serviceeducation fundraising for missions
new project	enhancement of ex	isting projecthealth/wellnesschildren/youth
Please explain the project in a	few words	
*Anticipated number of people	e working on the project	ct Adult Youth Children
*Anticipated number of people	potentially impacted b	py/with the project
Anticipated start date	One time event?	yes no
If ongoing, what are the anticip	pated future plans for co	ontinuation?
NOTE: Funds are not intended to be New projects are preferred, however	• • •	ion of an existing project is acceptable.
_	that all money will be used ecessitate return of the fund	
Please submit this electronically. If y	ou have questions contact p	pastorlou@nvc.net or

^{*}This is informational only – we realize that there are areas and cities that vary in population.