**UMCOR Mustard Seed Migration Grants**

**Application Form**

**Application Information**

There are four parts to this application.

**• Part I:** [**General Applicant Information**](#First_Heading)

**• Part II:** [**Project Information**](#Second_Heading)

**• Part III:** [**Project Budget**](#Third_Heading)

**• Part IV:** [**Signature**](#Fourth_Heading)**s**

Please be clear and concise when completing this form. All sections must be completed.

In Part IV, please note that applications must be signed by the senior pastor and lay leader of the local church and the bishop or director of connectional ministries in the annual conference.

Please refer to the Call for Applications posted at <https://umcmission.org/migration/mustardseed/> for additional information. Questions about the application form or the process can be sent to [mustardseed@umcor.org](mailto:mustardseed@umcor.org). Due to the high volume of applications expected, questions about particular projects cannot be addressed. *No phone calls please*.

Completed applications must be received at [mustardseed@umcor.org](mailto:mustardseed@umcor.org) no later than Sunday, May 16, 2021 at 11:59 p.m. Eastern Standard Time.

**Part I:** **General Applicant Information**

|  |  |  |
| --- | --- | --- |
| **Project Title** |  | |
| **Project Summary**  (25 words or less) |  | |
| **Amount Requested**  ($2,000 maximum) |  | |
| **Project Duration**  (6 months maximum) |  | |
| **Project Location**  (City, State) |  | |
| **Project Distance from Church** (in miles) |  | |
| **Local Church** | Name |  |
| Address |  |
| Telephone |  |
| Website |  |
|  | Annual Conference |  |
| **Total Number of Members in Congregation** |  | |
| **Contact Person** | Name |  |
| Title |  |
| Telephone |  |
| Email |  |
| **Does your church conduct background checks on staff and or volunteers?**  **Yes or no? If no, why?** | Yes  No  Explanation: | |
| **Has your church received an UMCOR or Global Ministries grant in the past?** | Yes  No | |

**Part II:** **Project Information**

1. What is the proposed project? Please list the activities the church would undertake with a Mustard Seed Migration Grant.

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1. How will refugees and migrants in the community benefit from these activities?

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1. How will members of the congregation benefit from these activities?

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1. How many refugees and migrants will benefit from these activities?

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|  |

1. How will the church identify or qualify refugees and migrants for this program?

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1. In what ways are the project activities new for the congregation?

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1. How will the congregation be directly involved in these project activities? Briefly mention each of the activities and identify the ways members of the congregation might be involved and how many members could be expected to participate.

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1. How will the church commit to educating or increasing awareness about migration in the entire congregation during the grant period?

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**Part III: Project Budget**

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| --- | --- | --- | --- | --- |
| **Item** | **Price per unit** | **Quantity #** | **Description** | **Expense** |
| *Groceries* | *$ 40.00* | *50* | *Groceries for 25 households delivered 2x* | *$ 2,000.00* |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  | $ - | 0 |  | $ - |
|  |  |  | **Total Amount Requested** | $ - |

**Part IV:** **Mustard Seed Migration Grant Application Signatures**

|  |  |  |
| --- | --- | --- |
| **Local Church** | Name |  |
| Address |  |
| Telephone |  |
| Website |  |
|  | Annual Conference |  |

|  |  |  |
| --- | --- | --- |
| **Senior Pastor** | Name |  |
| Date |  |
| Signature |  |

|  |  |  |
| --- | --- | --- |
| **Lay Leader** | Name |  |
| Date |  |
| Signature |  |

|  |  |  |
| --- | --- | --- |
| **Bishop or Director of Connectional Ministries** | Name |  |
| Date |  |
| Signature |  |