**NATIVE AMERICAN MINISTRIES SUNDAY GRANT APPLICATION**

Native American Ministries Sunday is one of the six special church-wide Sunday offerings. Through the Native American Ministries Sunday Offering, the General Board of Global Ministries provides grant funding for strengthening and development of ministries with Native Americans in annual conferences and target cities of the Native American Ministry program of Global Ministries. Grants are provided to assist local congregations and annual conferences to live into the four focus areas of ministries adopted at the 2008 General Conference. Grants can be used for outreach and community ministries, revitalization and discipleship formation, salary supplement, and building repairs and expansions.

* **Upon funding of your grant, your ministry/organization will be required to submit an annual progress/assessment report.**
* **No matching funds required for Native American Ministry Sunday Grants**

**Email completed grant applications to:**

Dana Lyles, PhD

Director/Team Lead

Multiethnic Ministries Unit

General Board of Global Ministries

dlyles@umcmission.org

**Section 1: Organization Information**

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| **1.** | **Name of Church Partner or Organization** |  | | **Year Founded:** |
| **2.** | **Address** *(Full Address for organization applying for grant: City, State/Province, Zip Code, Country)* |  |  | **Country:** |
| **3.** | **What is the name of the Head of Church Partner or Organization?** |  | | |
|  | **Email /Phone Contact Information** |  | | |
| **4.** | **Who is the Primary Contact for this Project or Grant Application?** |  | | |
|  | **Email /Phone Contact information** |  | | |
| **5.** | **Please check (X) one of these partnerships that best describe your connection to Global Ministries** | 1. UMC Annual Conference 2. UMC Central Conference 3. Autonomous Methodist Church 4. Ecumenical /Interfaith Partner 5. NGO/Secular Partner 6. CDP Site | | |
| **6.** | **Please describe your Church/Organization Mission and Experience** |  | | |

**Section 2: PROJECT/PROGRAM INFORMATION**

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| **1.** | **Project/Grant Name** | |  | | **Amount Requested USD:** | |
| **2.** | **Received Community Developers Program Funding in the past 4 years?** | | **Year (s):** | | **Amounts Funded USD:** | |
| **3.** | **Focus Area of Project/Program** *(please check/X ONE only)* | | 1. Leadership Development 2. Congregational Development 3. Ministries with the Poor 4. Global Health | | | |
| **4.** | **Project/Program Time Frame** *(if applicable)* | | **Start Date** *(mm/dd/yyyy)* | | **End Date** *(mm/dd/yyyy)* | |
| **5.** | **Project Location** *(where project/program will be carried out)* | | **CITY:** | | |
| **STATE:** | | |
| **6.** | **Community Context** *(*please briefly describe the socioeconomic and cultural context of the community, **highlighting** contextual information relevant to this proposal): | | | | | |
| **7.** | **Please describe the problem to be addressed through this project/program:** | | | | | |
| **8.** | **What is the goal of this project/program:** (What specifically will be done to address the identified problem)? | | | | | |
| **9.** | **Project/Program Activities (**Please describe the main activities that will enable you to achieve the above goal) | | | | | |
| **10.** | **Who or How will these activities or actions be implemented/carried out?** | | | | | |
| **11.** | **Who are the direct beneficiaries of this project/program?** | | *Number of Children* |  | | |
| *Number of Youth* |  | | |
| *Number of Women* |  | | |
| *Number of Men* |  | | |
| **12.** | **Community Strengths and Assets** Please give a brief description of the community resources relevant to this program that are seen as positive assets. e.g. hospitals, schools, churches, water sources, leadership, cultural characteristics, community groups. |  | | | | |
| **13.** | **Community/Partnerships’ Participation** *Please provide details on how the project will integrate feedback from the community and partners in the assessment, design and evaluation phases?* | |  | | | |
| **14.** | **Success** What results/outcome do you expect from the activities you described for this project and how does this fit into your Church or Organization strategic plans? | |  | | | |
| **15.** | **Sustainability** What steps will be taken to ensure that this project/program will continue? | |  | | | |
| **16.** | **Please submit church/organization Child Protection/Safe Sanctuaries Policy.** | | | | | |

**BUDGET (please include in-kind contributions whenever applicable). CDP Sites are required to contribute at least 10% of the income, and it must be reflected in the budget. Also, the Total Expenses must equal the Total Income.**

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| **Expenses** | **USD $** |
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| **TOTAL Expenses** |  |
| **Income** |  |
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|  |  |
| **TOTAL Income** |  |

**SAFETY of CHILDREN AND YOUTH**

The General Board of Global Ministries of The United Methodist Church seeks to assure the physical and sexual safety, emotional well-being and spiritual health of children, youth and adults. **Please provide the policy or a statement your Church or Organization uses for this standard**.

Standards for child safety such as stated in the United Nations Convention on the Rights of the Child can be found on their website. If you have questions about this requirement, please let us know.