# **United Methodist Voluntary Service Grant**

**(Grant maximum $5,000)**

**Program Description:** The United Methodist Voluntary Service (UMVS) serves as a resource to volunteer-based groups and programs that challenge unjust political, social, and economic systems which threaten the livelihoods of people of low socioeconomic status, as well as racial/ethnic communities. Grants can be used for short-term (less than 1 year) community-based outreach programs and events. The UMVS provides financial resources of up to $15,000 per congregation, annual conference, or mission partner.

**Program Objectives:**

* Support volunteer-based groups and programs that challenge unjust political, social, and economic systems which threaten the livelihoods of people of low socioeconomic status and racial/ethnic communities
  + Short-term (less than 1 year) community-based outreach programs and events.

**Maximum Grant Amount:** *$5,000.00*

**For more information or to submit an application, please contact:**

Dana Lyles, [dlyles@umcmission.org](mailto:dlyles@umcmission.org)

# **Grant Application Form**

*Please fill out every question to the best of your ability and get in touch with Global Ministries staff if you have any questions/concerns. Please do not use acronyms – spell the whole name if applicable.*

**Section 1: Organization Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Date of submission | Click or tap to enter a date. | **Name of the program this grant relates to** *(see top of page 1)***:** |  |
| Name of church partner or organization |  | | |
| **Organization contact information** | **Street address** |  | |
| **City, state/province, postal code** |  | |
| **Country** |  | |
| **Phone number** |  | |
| **General email** |  | |
| **Website** |  | |
| **Grant contact person** | **Name & title** |  | |
| **Email** |  | |
| **Phone** |  | |
| **Grant payee** *(if different from church partner or organization listed above)* | |  | |

**Section 2: Project Information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Project title |  | | | | | | | |
| Project location(s) *(be as specific as possible)* |  | | | | | **Amount requested (USD)** | | $ |
| If project is US-based: What is the racial/ethnic breakdown of the congregation/communities served by this project? | |  | | | | | | |
| Project time frame | **Start date** *(mm/dd/yyyy)* | | | **End date** *(mm/dd/yyyy)* | | | | **Project** **duration** |
| Click or tap to enter a date. | | | Click or tap to enter a date. | | | |  |
| Has this project or your organization received Global Ministries/UMCOR funding in the past 2 years? *(check one)*  Yes  No | | | **Year** | | **Amount** | | **Final report(s) submitted?** | |
|  | | $ | | **Yes  No** | |
|  | | $ | | **Yes  No** | |

**Section 3: Narrative**

|  |
| --- |
| 1. What is the goal of this project? *(50-word maximum)* |
|  |

|  |
| --- |
| 1. Please briefly describe the socioeconomic and cultural context of the community specific to the project location, highlighting needs/challenges addressed through this proposal. *(250-word maximum)* |
|  |

|  |
| --- |
| 1. Please outline the activities that this funding will support to achieve the goal? *(200-word maximum)* |
|  |
| 1. Name the program objectives from page 1 that align with your project and explain how they align? *(See cover page. 100-word maximum)* |
|  |
| 1. Who does this project reach/benefit and how are they selected? *(100-word maximum)* |
|  |

1. **Please fill out the chart below.**

|  |  |  |
| --- | --- | --- |
| **Category of persons reached** | **Number of individuals** | **Source of documentation** |
| *Example: Students* | *50* | *Attendance roster* |
| *Example: Mothers* | *10* | *Beneficiary list* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Section 4: Project Budget**

|  |  |
| --- | --- |
| **Income** | **USD** |
| General Board of Global Ministries (or Plan) | $ |
| Other General Agency Support – [specify agency] | $ |
| Annual Conference / Episcopal Area | $ |
| Local Churches / Individuals | $ |
| Other Grants | $ |
| Partner Organization | $ |
| Event Registration Fees | $ |
| In-Kind Gifts | $ |
| **TOTAL** | **$** |

|  |  |
| --- | --- |
| **Expenses** *(example categories: personnel, materials, food, lodging, publication, equipment, space, utilities, travel)* | **USD** |
| *Example - Personnel* | *$###.##* |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
| **TOTAL** | **$** |

Additional Notes:

· Global Ministries reserves the right to require a more detailed budget breakdown for approval, request details on the intended use of grant funds, and/or request proof of expenses after the grant closes.

· Local contributions are expected on programs/projects funded through Global Ministries – please demonstrate at least 10% local contribution. Please include in-kind contributions (space, labor, materials, etc.) where applicable.

· The expenses and income must match. Include the whole amount requested from Global Ministries in your income.

**Section 5: Child Safety Policy**

***Global Ministries requires grantees who work with children and youth (under 18 years old) when using funds provided by Global Ministries to either adopt its Child Safety Policy or have its own policy, which substantially complies with and contains the core tenants set forth in Global Ministries’ Child Safety Policy. If your organization is applying for funding for work even in part with children and youth (under 18 years old), please attach your organization’s Child Safety Policy or agree that you will adopt Global Ministries’ Child Safety Policy.***

***Double click this icon to access Global Ministries’ Child Safety Policy: ***

***Double click here to access the Global Ministries Child Safety Checklist:***  

Applicant agrees to adopt Global Ministries’ Child Safety Policy.

Applicant attaches its own Child Safety Policy, which meets Global Ministries’ requirements.

Applicant confirms this proposal does not involve any work with children and youth (under 18 years old).

**Section 6: Signatures**

|  |  |  |  |
| --- | --- | --- | --- |
| Local pastor/leader of the project | | District Superintendent | |
| **Name** |  | **Name** |  |
| **Title and name of organization** |  | **Title and name of organization** |  |
| **Signature** |  | **Signature** |  |
| **Date** | Click or tap to enter a date. | **Date** | Click or tap to enter a date. |

|  |  |
| --- | --- |
| Bishop | |
| **Name** |  |
| **Title and name of organization** |  |
| **Signature** |  |
| **Date** | Click or tap to enter a date. |