

# **HIGHER EDUCATION & MINISTRY**

General Board of Higher Education and Ministry

#### Racial/Ethnic Local Church-RELC Grant

**Program Description:** The General Board of Global Ministries provides grants to foster the development and strengthen the witness and ministry of racial/ethnic local churches in the United States. Funds are provided to assist local racial/ethnic congregations and annual conferences with projects and programs on one of the four areas: 1) Leadership Development; 2) Church Growth and Development; 3) Ministry with the Poor, and 4) Health Ministries.

#### **Program Objectives:**

- Leadership Development
  - Contextually appropriate training programs and resources for emerging racialethnic leaders.
  - Training programs and opportunities that develop children, youth and young adults in racial-ethnic churches.
- Church Growth and Development
  - o The development of racial-ethnic new church starts and congregations.
  - o The revitalization of existing and emerging racial-ethnic congregations.
  - The development, resourcing and multi-cultural congregations and ministries.
  - One-year salary support for racial-ethnic pastors in racial-ethnic local churches and/or racial-ethnic pastoral leadership involved in the development and strengthening of racial-ethnic congregations. (*This salary supplement cannot be used to meet conference minimum salary or to complete equitable compensation and salary supplement funds must include the appropriate fringe benefits.*)
- Ministry with the Poor
  - Provide funds for churches to engage and transform their communities and alleviate human suffering (services like housing, recovery circles, legal aid, after school, etc.).
  - Funds may be used for programs such as: recovery circles, housing, legal aid, medical care, HIV/AIDS services, after school programs, women's empowerment, and family and children's support.
  - Community development.
- Health Ministries
  - Programs to develop skills in self-care; health and well-being; and prevent and manage diseases.
  - Programs that facilitate access to health educational programs existing in the local context.
  - Skills building to equip leaders on health issues.
  - Prevention and intervention on domestic violence.

### **Program Criteria:**

- The ministry/project must focus on developing and strengthening the racial-ethnic local church for witness and mission.
- Applicants can apply for either a programmatic grant OR pastoral salary support, not both.

- The ministry/project must involve racial-ethnic church members in the planning, leadership, and decision-making.
- Priority will be given to new programs. Grants funded in the previous three years will not be given priority for the funding in the current year cycle.
- The ministry/project must be a program of a majority racial-ethnic local church or annual conference of the United Methodist Church in the United States.

#### Instructions:

- The grant application requires a signature of the district superintendent and the resident bishop of the area where the ministry/project is located, plus the racial-ethnic committee head (if applicable) or Connectional Ministries, and the local church pastor. Please see the final page of the application for signatures.
- Maximum grant for a project is \$5,000 and applications must reflect other resources from local congregation/district and/or conference. The maximum grant for salary support is a one-year grant, in the amount of \$5,000.
- Churches must contribute at least 10% of the requested grant amount, and the contribution must be reflected in the income section of the budget.

Final Submission Deadline: March 7, 2025

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

Email for Submission: relcgrants@umcmission.org



## **Grant Application Form**

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

Date of submission						
Organization or church nan	ne					
	่ □ บเ	MC church, c	onference c	r entity		
	□ Ot	her affiliated	d Methodist	church or entity		
Organization type	□ Re	gistered nor	n-religious no	on-profit organizatio	n, NGO or charity	
(select one that best	□ Re	gistered reli	gious non-pi	ofit organization, N	GO or charity	
applies)	□ UN	л-related scl	nool	_	•	
	☐ Scl	nool not rela	ited with the	e UMC		
	□No	ne of the ab	ove. My fisc	al agent will be:		
If UMC church or organizat			,			
conference are you located						
Organization's EIN (if US-bo	ised)					
or registration number (no	n-US, ij	<sup>f</sup> available)				
	Street address		1			
	City					
	State	/province				
Organization contact	Posta	l Code				
information	Country					
	Phone number					
	Gene	ral email				
	Webs	site				
	Name					
Grant contact person	Title					
Grant Contact person	Email					
	Phone					
Project title						
Project location(s)				Amount	\$	
Project country				requested (USD)	T	
Project time frame	Start date:			End date:		



	Section 2: Narrative
1.	What is the goal of this project? (50-word maximum)
2.	Briefly describe the specific needs and conditions and their causes that you seek to address through this project. (300-word maximum)



<ol> <li>Considering the situation and its context described above, please describe your project's objectives, activities, and the desired result(s) for each. (Please add additional activities or objectives as needed.)</li> </ol>
Please structure your responses like this: Objective 1: [insert objective]. Activity 1: [insert activity description]. Desired results 1: [insert desired results description]. Repeat for additional objectives. You can delete this text and enter your response, or use it as a template.

4.	Briefly describe the assets and capacities (skills, talents, expertise, leadership, networks community relationships, volunteer labor, supplies, etc.) that you and your community to this project. (150-word maximum)



5.	(Grants	up to \$100,000 only) How many people will this project support directly and indirectly?					
	Number directly supported						
	Number indirectly supported						
	Grants over \$100,000 must submit accompanying M&E Metrics and Budget Reporting						
	Templates, as well as any required program narrative addendum.						
6.	_	organization a new grant applicant for Global Ministries, UMCOR, or the General of Higher Education and Ministry? $\Box$ Yes $\Box$ No					
	a.	If yes, please tell us more about your organization and its mission, as well as how it is uniquely suited to carry out this project.					
	b.	If no, please tell us about support your organization has received from these agencies in the past two years.					
		(150-word maximum for either prompt)					



# Section 3: Project Budget

# (Grants up to \$100,000 only)

Income	USD	Narrative/Description
Requested Global Ministries UMCOR, or GBHEM Support	\$	
Other support (organizational budget support, participant registration fees for events, other grants, etc.)	\$	
TOTAL	\$	

Expenses	USD	Narrative/Description
Program Personnel	\$	
Direct Program Costs – Objective 1:	\$	
Direct Program Costs – Objective 2:	\$	
Direct Program Costs – Objective 3:	\$	
Visibility and Publication Costs	\$	



Support Personnel	\$
Equipment	\$
Office Rental and Supplies	\$
Travel	\$
Communication	\$
Other Operational Costs	\$
TOTAL	\$

Grants over \$100,000 must submit accompanying M&E Metrics and Budget Reporting Templates, as well as any required program narrative addendum.

#### Additional notes on the budget:

- Please review the grant program guidelines for budget restrictions that may apply.
- We reserve 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.
- Monetary contributions by local communities or other grantors should be included in the "other support" category.
- Only fill in amounts on relevant categories; leave others blank.
- Include the whole amount requested from Global Ministries, UMCOR, or the General Board of Higher Education and Ministry in your income, which should match the requested amount from section 1 (Organization & Project Information).
- Objectives 1-3 Direct Program Costs should reference the direct expenses associated with your objectives outlined in section 2 (Narrative). Please add other objectives as needed.



Global Ministries and the General Board of Higher Education and Ministry require grantees who work with children and youth (under 18 years old) when using funds provided by either agency to either adopt their Child Safety Policy or have its own policy, which substantially complies with and contains the core tenants set forth in the agencies' 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 the Child Safety Policy of Global Ministries and the General Board of Higher Education and Ministry.

Click here to	access	the	Global	Ministries	s and	General	<b>Board</b>	of Highe	er Education	n and	Ministry	y Child
Safety Policy	<i>'</i> .											

$\square$ Applicant agrees to adopt the Global Ministries and General Board of Higher Education and Ministochild Safety Policy.
$\square$ Applicant attaches its own Child Safety Policy, which meets Global Ministries' and General Board o Higher Education and Ministry's requirements.
$\square$ Applicant confirms this proposal does not involve any work with children and youth (under 18 year old).
Section 5: Signature

By signing below, you certify that the details provided in this application are accurate and truthful.

Head of organization			
Name			
Title			
Organization name			
Signature			
Date			



## Section 6: Addendum

Part I: Additional Context		
1. What is the racial/ethnic breakdown of the congregation/communities served by this project?		
Part II: Additional Signatures		
Racial/ethnic committee he	ead (if applicable) or Director of Connectional Ministries	
Name		
Title and name of organization		
Signature		
Date		
	Bishop	
Name		
Title and name of organization		
Signature		
Date		
	District Superintendent	
Name		
Title and name of organization		
Signature		



Date

#### **FOR INTERNAL USE ONLY**

Grant Number		
Source of Funding (include		
Advance/DDTR info)		
Project Manager		
Consulting		
Executive/Reviewers		
Reviewer Comment (please		
include information about		
history of agency's		
relationship to partner)		
Disbursement Schedule	Payment Date:	Amount:
Reporting Schedule	Report (time period):	Due Date:

