

# **PRESBYTERIAN WOMEN - SYNOD OF THE TRINITY**

## **Mission Project Application**

**2027**

(Application must be typed)

Organization Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Website: \_\_\_\_\_

Presbyterian Women Contact: \_\_\_\_\_

Title or Position \_\_\_\_\_

Presbytery: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail \_\_\_\_\_

Start-up Date for Project: \_\_\_\_\_

### **Questions to be Answered**

1. Provide a mission statement from your organization and a purpose statement that directly relates to the proposed project. (A mission statement is defined as a cross between a slogan and an executive summary. It should say who your organization is, what you do, what you stand for and why you do it)
2. Briefly list the activities of your request and how it will meet basic human needs. (Please limit to 150 words)

3. This is a creative project less than three years old \_\_\_\_\_. This is an existing project moving in a new direction .
  
4. Briefly explain how a one-time grant will help this project and assist the persons served. Describe how this will impact the lives of women, children, youth and young adults, racial-ethnic persons or persons with a disability.
  
5. What expected changes, either long-term or short-term, would receiving this funding allow?
  
6. Specifically how would funds received from Presbyterian Women in the Synod of the Trinity be used?
  
7. How will the program continue once the received funds are depleted?
  
8. List other sources of funding being sought for this project:
 

| Funding Source | Amount Requested | Assured to Date | Date Decision Expect |
|----------------|------------------|-----------------|----------------------|
| _____          | _____            | _____           | _____                |
| _____          | _____            | _____           | _____                |
| _____          | _____            | _____           | _____                |
9. Describe your process of evaluation and accountability.

10. Identify dates of previous funding request(s) to Presbyterian Women and outcome.

| Date | Amount of Grant | Name of Project | Birthday or Thank Offering, etc. |
|------|-----------------|-----------------|----------------------------------|
|------|-----------------|-----------------|----------------------------------|

|       |       |       |       |
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| _____ | _____ | _____ | _____ |
|-------|-------|-------|-------|

11. Attach a project budget, in US currency, that shows specifically how the money will be spent.

12. Attach any available pictures (preferably black & white) of the current circumstances or structures and pictures or drawings of the proposed project.

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Name of person submitting application

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone (\_\_\_\_)\_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_

Signature (required)

Date\_\_\_\_\_

Relationship to Project\_\_\_\_\_

Name of Board chair or other responsible person\_\_\_\_\_

Address \_\_\_\_\_

Synod\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone (\_\_\_\_)\_\_\_\_\_

Email\_\_\_\_\_

\_\_\_\_\_

Signature (required)

Date\_\_\_\_\_

Relationship to Project\_\_\_\_\_