# Send completed application by email to: DMatheson@united-church.ca

**HORSESHOE FALLS REGIONAL COUNCIL**

*Supports, Connects, Empowers Communities of Faith*

# APPLICATION FOR MISSION SUPPORT GRANT – SUPPLEMENTARY

**GUIDELINES**

Mission Support grants for 2022 have been made in accordance with the Region’s priorities: deepening faith, strengthening witness, and offering ways of serving our communities and the world. After responding to the applications received, there is a balance left of $46,300. You are invited to apply for these additional funds. This is one-time funding for 2022

# Closing date for submission of application is midnight Tuesday, February 1, 2022

# Applications must be made by email to DMatheson@united-church.ca

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**Who May Apply?** Applications should pertain to an outreach ministry or a community ministry within the boundaries of the Horseshoe Falls Regional Council. All applications must come with approval from their governing body or equivalent.

**Regional Priorities** A project must relate to at least one of the Region’s Mission Support priorities: Children & youth, Chaplaincy, Social Justice

**Accountability** All grant recipients are required to send

* a brief written report
* a financial statement
* void cheque

To DMatheson@united-church.ca by Tuesday, February 1, 2022

# HORSESHOE FALLS REGIONAL COUNCIL

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# APPLICATION FORM

**MISSION SUPPORT GRANT – SUPPLEMENTARY**

## IDENTIFICATION

Name of Applying Group/Body:

Mailing Address:

Charitable Status Number:

Direct Deposit information:

Name of Contact Person:

Email Address:

Phone Number:

Governing Body or Equivalent

Name of contact person:

Position in governing body:

Email Address:

Phone Number:

## THE MISSION SUPPORT PROJECT

Name of Ministry/Project:

Describe the purpose/vision of the project/ministry:

Regional Mission Support Priority (Children & Youth, Chaplaincy, Social Justice):

Describe how this ministry/project relate to the region’s Mission Support priority that you have named:

Describe the desired outcomes/impact for the initiative:

## FUNDING

Describe reasons for the request and how you intend to spend the money (Include your budget for the project)

Name any other sources of funding (secured or anticipated)

## REGIONAL COUNCIL ACTION