



Presbytery of West Jersey

1701 Sycamore Street, Haddon Heights, NJ 08035
Voice: 856.547.5100 Web site: www.wjpresbytery.org

2011 Funding Application for Congregational Support

Submission Deadline: May 10, 2010

Thank you for submitting this application for mission funding. We look forward to reviewing your request.

You may open this as an MS Word document on your computer, complete it and Email a copy to the presbytery office: pamc@wjpres.net

A completed, signed form, with any required attachments must be mailed by May 10, 2010 to: **The Presbytery of West Jersey, Mission Committee, 1701 Sycamore St., Haddon Heights, NJ 08035, Attn.: Pam Cosans, Administrative Assistant.**

About The Application

- The Mission Committee receives many requests for funding, and must have sufficient time to review each of them. Applications that meet the required criteria, and are approved by the committee, will then be included on the 2010 Proposed Mission Funding Budget, which the Mission Committee must submit to Presbytery at the September, 2010 Meeting for review. Therefore, your fully completed application must be received no later than May 10, 2010. Late submissions CANNOT be considered for the 2011 funding cycle. **The 2011 Mission Budget is voted on for approval at the November, 2010 Presbytery Meeting.** You will be notified, in writing, of the Presbytery's decision.
- **A copy of the Church's Annual Report must be attached.**
- **The Mission Committee's funding process does NOT give mission money to pay salaries of Pastors who are being compensated above the Presbytery's current minimum for terms of call.**

If you need help in completing this Application, or have questions, please contact Mission Committee Chairperson, The Rev. Don Painter (Loganpres@verizon.net)

The Presbytery of West Jersey Mission funding process will give priority to:

The transformation of existing congregations;

The development of new congregations;

Community-directed outreach projects provided by existing congregations;

Faith based programs that meet human need,

especially those supported by churches within the Presbytery.

DATE: _____

AMOUNT OF FUNDING REQUESTED: \$ _____

Name of Church: _____

Mailing and Street Address: _____ Apt./Suite.#: _____

Town/City: _____ State: _____ Zip Code: _____

Contact Person: _____ Title: _____

Telephone: (_____) _____ Fax: (_____) _____

Email address: _____ Web address: _____

Name of Pastor: _____ Full-time/ _____ Part-time % _____

Please Answer the Following - Use Attachments Where Applicable

Please know that, while this is an application for financial funding, The Committee on Mission, of the Presbytery of West Jersey, would like to know of other ways in which we may be of assistance to your church's mission...

I. How Will Funding Be Used?

1. *The goals:* _____

2. *The objectives* _____

3. *How will you measure the success/failure of this project/program?* _____

4. If funds were received last year, attach an itemized report on how they funds were expended.

II. Please Submit The Following Information

1. Attach the Church's annual operating budget and actual income and expenses for most recently completed fiscal year AND for current year-to-date.

2. **Attach an itemized budget for how this specific grant will be used. Identify each source of revenue, and the amount.**

3. Submit your Financial Audit.

4. The Church's latest annual report is attached.

5. Describe the expenditure of any Mission Funding received from the presbytery from the previous year: _____

6. What goals did you succeed in meeting with this funding? _____

7. List any surplus from previous Presbytery Mission Committee Funding: \$ _____

8. How many years have you been requesting Presbytery assistance? _____

9. What year do you plan discontinuing your requests for funds? _____

10. Who was consulted in the preparation of this application (check all that apply):
____ Pastor
____ Director ____ Staff ____ Session/Board ____ Community/Congregation Representatives

11. What is your Church's plan to becoming financially self-sufficient? _____

III. CONGREGATION-INFORMATION

1. What is the size of the Church's congregation: _____
2. What is the Church's average weekly attendance: _____
3. **Is the congregation involved in the formal Congregational Transformation process of the Presbytery of West Jersey?** YES NO
 - a. If Yes, when did the Session vote to become a Transforming Congregation? _____
4. Is the Pastor participating in a Transforming Pastor's Group? YES NO
5. **Does the Church participate in a whole-congregation, every-member stewardship program?** YES NO
 - a. If Yes, please identify the programs offered, and briefly describe the results: _____

6. **Describe what your congregation is doing to expand your church's ministry and extend its mission into your community:** _____

7. Which of the following programs does the Church offer: Adult Sunday School
 Children's Sunday School Women's Ministry Men's Ministry
 Couple's Ministry Youth Programs Community Outreach Programs
 Other: _____

IV. BUDGET FORM

This form is to be used as a guideline. Some items listed may not apply to your Church or project. This information needs to be clear and accurate. You may substitute your own budget format or spreadsheet.

INCOME/REVENUE	
1. Fundraising Events	\$
2. Gifts/Bequests	\$
3. Miscellaneous contributions	\$
4. Presbytery Mission Grant	\$
5. Synod Mission Grant	\$
6. GA Mission Grant	\$
7. Other grants	\$
8. Program fees	\$
9. Endowments	\$
10. Investment income/transactions	\$
11. Congregational Pledges	\$
12. TOTAL INCOME/REVENUE	\$
EXPENSES	
13. Salaries - pastors	\$
14. Salaries - other	\$
15. Benefits (Pension Funds, etc.)	\$
16. Program expenses (consultant, etc)	\$
17. Maintenance/Building expenses	\$
18. Travel and Meetings	\$
19. Miscellaneous expenses	\$
20. TOTAL EXPENSES	\$
21. SURPLUS / (DEFICIT)	\$

*** Keep in mind, if you feel elements of your budget require an explanation, please attach a brief narrative.**

By this signature, we certify that this application for funding has been approved by the Board/Session of this church:

_____, *Clerk of Session* _____
Signature *Date*

(Please Print Name)

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This form is on the Presbytery's Web site: www.WJPRESBYTERY.org

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