

Brentwood United Methodist Church Foundation Grant Request Proposal

Purpose

Brentwood United Methodist Church Foundation, Inc. is specifically organized for the purpose of supporting the programs, ministry, works, goals and objectives of Brentwood United Methodist Church (BUMC). Foundation grant monies should apply to projects/initiatives/programs which are consistent with the foundation's purpose.

Grant Request Instructions

1. Before submitting a grant request proposal to the BUMC Foundation, you must have received approval from BUMC's applicable team and/or council (i.e. Board of Trustees, Finance Committee, Serving Team, etc).
2. Proposals should be typed using the proposal below. If you have an electronic copy of the proposal, simply start typing in the gray box within each proposal section. If you do not have an electronic copy, simply type your proposal using the proposal format. Please include the proposal section headings.
3. All sections must be completed and submitted. If the projects/initiatives/programs will be using outside vendors, please enclose competitive vendors' quotes/estimates. All quotes/estimates are due at time of submission. Also, please enclose any other attachments that are a part of your submission.
4. Proposal submissions must be sent to:

Brentwood United Methodist Church Foundation
c/o Melissa Wagner
309 Franklin Road
Brentwood, TN 37027
mwagner@bumc.net

The proposal will be considered at the next meeting.

Grant Request Proposal

1. BUMC Team and/or Council Approval Signature.

Name	Signature	Date	Team/Council

2. Contact Information

Please identify the contact information for the individual who will be responsible for communicating with the Foundation regarding the grant. Please include name (if different from person submitting proposal), mailing address, phone numbers, and email.

3. Ministry Partner Type/Name

Please indicate which type of BUMC Ministry partner this grant will benefit and the name of the partner

BUMC Ministry (Children, Youth, Stephen Ministry, etc)

[Redacted]

BUMC Daughter Church

[Redacted]

BUMC Strategic Ministry Partner (Harvest Hands, CYMT, etc)

[Redacted]

Missions Partner

[Redacted]

Affiliate Partner

[Redacted]

4. Project/Initiative/Program Description

Please describe the specific project/initiative/program for which grant funds are being requested.

[Redacted]

5. Amount Requested

State the specific amount requested. Also include the timing as to when the funds are needed.

[Redacted]

6. What Are The Goals of the Project/Initiative/Program

[Redacted]

7. Target Population

Please describe whom your organization will serve and the geographic area covered.

[Redacted]

8. Need/Problem Statement

Please describe the need for the services to be provided. How were the needs determined?

[Redacted]

9. Coordination and Collaboration

What other organizations, etc. are you working together with to accomplish your project/initiative/program? Will this project be funded entirely by the BUMC Foundation or are there other sources of funding? If so, please identify the other sources, the amount of funding, and have the funds been granted and or collected?

10. Organizational Capability

Please describe your capability to implement the proposed project and achieve the proposed results.

11. Outcome/Results

Please describe the short term and long term results your organization hopes to achieve. How will the effectiveness of this project be assessed?

For Foundation Use Only:

_____	_____
BUMC Finance Director or Executive Pastor Signature	Date