

# 2023 Mission Grant Application

LCMS Kansas District

Submission Deadline: **Thursday, September 22, 2022**

Please return this application (along with your budget, if in a separate document) to:

LCMS Kansas District  
ATTN: Janet Powell  
1000 SW 10<sup>th</sup> Ave.  
Topeka, KS 66604-1104



Applicants will be notified  
of award decisions in  
November.

Scan/email: [janet@kslcms.org](mailto:janet@kslcms.org)

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Project Title: \_\_\_\_\_

Congregation/Organization Name: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_

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

Contact Email: \_\_\_\_\_

**Instructions to Applicants:** To be eligible for a mission grant, please answer the following questions and provide the requested information. Grant requests may be fully funded, partially funded, or denied, based on information available on the grant application as well as availability of funding, which is limited. Traditionally, the Board of Missions has not awarded grants to fund salaries, construction of buildings, or other capital improvements. However, short-term exceptions have been made on occasion.

If you have questions about your project or application, please contact Rev. Dan Galchutt at the District Office at **785-357-4441, ext. 2002** or [dangalchutt@kslcms.org](mailto:dangalchutt@kslcms.org).

## **PART I: PROJECT DESCRIPTION**

### **Brief Summary**

*In one or two sentences, describe your missions project.*

### **Project Rationale**

*How will this project enhance your particular ministry? More broadly, how will it help you carry out the mission Christ has given His Church?*

### **Project Goals and Plan Particulars**

*Identify **up to 3 SPECIFIC goals** that you have for this project. What do you hope to accomplish? How will you get there? **List SPECIFIC action steps**, including timelines. (e.g., "We plan to make door-to-door visits to everyone in a 5-block radius by the end of December.")*

#### **GOAL 1:**

**Action steps to achieve Goal 1 (please include timeline)**

**PART I: PROJECT DESCRIPTION CONTIN.**

**GOAL 2:**

**Action steps to achieve Goal 2 (please include timeline)**

**GOAL 3:**

**Action steps to achieve Goal 3 (please include timeline)**

**Evaluation**

*Describe your plan for project assessment. How will you evaluate your progress? What will you do with that information?*

## **PART II: PROJECT BUDGET**

**Grant Amount Requested for Fiscal Year 2023:** \_\_\_\_\_

### **Anticipated Expenses**

*Identify all expenses associated with this project (e.g., materials, travel, labor, food, etc.). Also, please attach a budget of your congregational ministry along with the completed Mission Grant application.*

## **PART III: PROJECT SUPPORT**

1. What partners (if appropriate) have been identified to assist in supporting this ministry project?

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**PART III: PROJECT SUPPORT CONTIN.**

2. What quantifiable level of commitment are members of the congregation/organization/partner(s) willing to pledge to the mission/ministry/project?

❖ Number of people supporting the project: \_\_\_\_\_

❖ Number of hours: \_\_\_\_\_

❖ Pledging amount: \_\_\_\_\_

❖ Ministry gifts committed by your members: \_\_\_\_\_

3. What additional sources of support/income beyond the District Mission Grant are available to support the project?

4. What funding streams will be developed to ensure the continued viability of the project (if applicable)?

5. Please indicate the mission support (commitment/pledge) directed to the District/Synod from your congregation in the last fiscal year.

❖ Dollar amount committed: \_\_\_\_\_

❖ Representing % of income: \_\_\_\_\_

❖ Total annual income to your congregation or organization: \_\_\_\_\_