

2016 OCEANS OF GRACE FUNDING APPLICATION



Our mission is two-pronged:
*Ministering to peoples' human needs
such as food, clothing, shelter, and health & wellness; and
through our worship and various faith-formation programs.*

We commit ourselves to funding various outreach ministries through the establishment of the Oceans of Grace Fund so that all God's people – those who give and those who receive – are blessed. We have dedicated one of our buildings for this purpose, and called it "Oceans of Grace: An Outreach Ministry of First Lutheran Church." We invite all who are inspired to submit an application for support as they are called.

Below are the questions that we ask you to complete about your program/proposal so that our Steering Team can make an informed choice about support for each submission. Please submit your proposal in a typed document, using an easy-to-read font; maximum 4 pages.

Name, address, phone, and email of person submitting request: Name: _____
Address: _____ Phone: _____ Email: _____

1. Program/Proposal name and brief description
2. Please provide a Mission Statement, and how your program addresses the mission of Oceans of Grace. What is your intended outcome or goal for this program/proposal?
3. Target Group(s): How many participants do you expect to serve in the coming year? How will you recruit participants for your program?
4. *(If an existing ministry)* Last year, how many people did you serve? Do you plan to increase this number; if so, by how much and how?
5. How do you keep record (or plan to) for your project, e.g. # of the people you serve, volunteer/staffing hours, costs, etc.? What kinds of information do you keep?
6. How many staff members or volunteers will you need to serve your target group? How many hours do each of you work? How will you recruit and train staff and/or volunteers?
7. Do you have a management team and/or oversight committee?
8. If there is one person who manages the program, is there a procedure for someone to take over if necessary?
9. Do you have a wish list?
10. What are your future goals for the program?

And from his fullness we have all received, grace upon grace. John 1:16

Please submit a budget for your project. *(Please see budget format below. You may submit your own spreadsheet but please be sure to include all the information indicated below.)*

Program Name:	
Personnel expenses	\$
Staff Costs	
Fringe Benefits	
Equipment/Supplies	
Office	
Other <i>(Please specify each item):</i>	
Travel/Related Expenses	
Other Expenses <i>(Please name):</i>	
Income from other sources, e.g. dues/participant contributions, other outside funding sources <i>(Please specify each source):</i>	\$
Total Amount Requested from Oceans of Grace:	\$

*Applications are accepted during the months of March and October. Completed applications should be mailed to Connie Slick, 49 Narragansett Avenue, Jamestown RI 02835, or e-mailed to cslick@cox.net. Unless further information is requested, award notification will take place by the end of the following month.
Thank you for your submission!*

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