

2019
UNITED CHRISTIAN WOMEN'S MINISTRIES
INFORMATION ABOUT THE
FAMILY MINISTRY GRANT APPLICATION

Family Ministry is designed to address the needs and concerns of the family as a unit and its individual members. **It is one of the most important arms of the United Christian Women's Ministries of the Church of Christ Holiness USA.** This application is designed to provide a means for the local bands to obtain funds from the National UCWM **Family Ministry** to assist in promoting the works of the local band in shaping **Family Ministry** to meet the needs of the family. Applicants will need to...

1. Complete the attached application forms. The application is required for all grants awarded through the National United Christian Women's Ministries. **All spaces must be completed for the application to be considered.**
2. Obtain the attached three reference forms which are required: one from your pastor, *FM Grant Form-01*; one from your District and Diocese president, *FM Grant Form-02*; and one from your Presiding Bishop, *FM Grant Form-03*. Please scan the completed and signed forms and submit with the proposal.
3. **Please scan and submit the above forms and essay to Missionary Bonita A. Brown by Monday, July 1, 2019 to email:**
bonitaa.browncchusa001@gmail.com
***This is the only email address that will accept the applications.**

***NO APPLICATIONS WILL BE RECEIVED AT THE NATIONAL CONVENTION.**

4. **Submit a proposal of one to two pages (no more than two pages) typed and double-spaced) which describes (1) the family ministry goals, objectives and content. (2) How the family ministry will reach others and lead them to Christ. (3) Names of Project Manager (s). (4) Detailed budget of project on a separate page. All requirements MUST be completed for the application to be considered.**

Note: **Five** national awards will be granted annually to local bands. Multiple churches within a Diocese may qualify and be the recipient of a **Family Ministry** grant. Award amounts will be five hundred dollars (\$500.00) per band. **This award is not designed to sustain the Ministry.** New applications will be given top priority. Future awards to previous awardees may be granted only for those bands **demonstrating new and creative projects to further Family Ministry.**

**2019 UNITED CHRISTIAN WOMEN'S MINISTRIES
FAMILY MINISTRY GRANT APPLICATION
PASTOR'S REFERENCE FORM**

Dear Pastor:

This is a reference form required for submission with our Church's application for a Family Ministry Grant from the National United Christian Women's Ministries. Pastor can return application to the person he received it from. That person should give applications to the Diocese President at the Diocese convention for the signatures. All application must be submitted to National Family Grant Ministry Facilitator by Monday, July 1, 2019.

National Family Ministry grants are awarded annually to several Family Ministry bands. The criteria for grants include overall spiritual impact on the Family and Church, financial need, Christian character, service to others, and future goals. Listed below are several qualities for the Family Ministry Grant. Rate each item honestly and thoughtfully and check the most appropriate response. **Please DO NOT OMIT any areas.**

Qualities	Exceptional	Good	Fair	Poor	No Knowledge
Christian influence					
Cooperation					
Degree of commitment to overall UCWM Ministries					
Maturity					
Motivation					
Need for grant					
Potential to expand impact of Family Ministry					
Reliability					

Additional Comments: _____

Name and Address of Church _____

Pastor's Name (*Please Print*) _____

Pastor's Signature _____ Date _____

**2019 UNITED CHRISTIAN WOMEN'S MINISTRIES
FAMILY MINISTRY GRANT APPLICATION
GRANT REFERENCE FORM**

This is a reference form for an applicant who is applying for a Family Ministry Grant from the National United Christian Women's Ministries. Applications can be given to Diocese President at the Diocese convention for review.

(Name of church) _____ of the _____ Diocese requests that you complete the information below. Rate each item honestly and thoughtfully and check the most appropriate response. Please **DO NOT OMIT any areas.**

Qualities	Exceptional	Good	Fair	Poor	No Knowledge
Christian influence					
Cooperation					
Degree of commitment to overall UCWM Ministries					
Maturity					
Motivation					
Need for grant					
Potential to expand impact of Family Ministry					
Reliability					

Local Family Ministry Facilitator _____ Date _____

I agree with request and rating _____

Additional Comments: _____

District UCWM President _____ Date _____

I agree with request and rating _____

Additional Comments: _____

Diocese UCWM President _____ Date _____

**2019 UNITED CHRISTIAN WOMEN'S MINISTRIES
FAMILY MINISTRY GRANT
RECOMMENDATION FROM PRESIDING BISHOP**

Please **print** the following information:

Presiding
Bishop _____

Home Phone _____ Office Phone _____

Address _____

City _____ State _____ Zip _____

E-Mail Address _____

In consideration of _____ request
(Name of Church)

for a National UCWM Family Ministry Grant, my recommendation is:

___ Strongly Recommend ___ Recommend ___ Recommended with Reservations ___ Do Not Recommend

Please write additional comments below.

Signature _____ Date _____