**Growth Fund Application Form**

Thank you for considering applying for a Growth Fund grant. Before you fill this form in, please read the guidance online which can be found here <https://www.cofesuffolk.org/for-parishes/growing-in-god/growth-fund/> Please return the completed form to the Fund Administrator helen.prior-townsend@cofesuffolk.org

Please note: your Incumbent must sign off your application before it will be considered.

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| **Benefice Details** |
| **Benefice and Deanery Name** |  |
| **Name of Project** |  |
| **Contact Person** |  | **Position:** |  |
| **Phone number** |  | **Email:** |  |
| **Date of PCC or Standing Committee meeting when this application was discussed.**  |  |
| **If your application is successful which church bank account should the grant be sent to?** | Account Name where you want the money paid:Note: Our finance team have the bank details of all Anglican churches in the Diocese and so there is no need to add sort code or account number here. |
| **Your Incumbent’s Name** |  |
| **Your Incumbents Signature and Date** |  |

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| **Project Details**Please include your **Plan for Growth** with this form. The description below should show how this project fits into that plan. |
| **How much money are you applying for?**We offer grants up to £1,500 |  |
| **What is the Mission Project you want to fund?**Please summarise the project, its aims and expected outcomes, and how it will work. Please explain how it fits in with your Plan for Growth, and how this grant will help.(300 - 500 words) |  |
| **Please say which growth criteria this engages with** | Growing in Number or Growing Younger |
| **What is the timescale for this project?** Please include start and end dates. |  |
| **How does this connect with other discipleship activities?** |  |

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| **Budget Details****Please complete this budget form if your grant request is over £500**Mark ‘none’ in any rows that do not apply. |
| **Item** | **Amount** | **Comments** |
| **Income** |  |  |
| Church |  |  |
| Grants applied for |  |  |
| Other funding sources |  |  |
| **Total Income:** |  |  |
|  |  |  |
| **Expenditure**e.g. resources, training, cost of hall hire, catering etc |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Expenditure:** |  |  |
| **Comments:** |  |
| **How will this project continue once the grant runs out?** |  |

**For Office Use Only**

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| **Sign off Details**One the monies have been agreed this needs to be updated to keep a record of how we have assessed the application, for future reference. |
| **Date Received**When was this application received? |
| **Reason**On what basis did we grant this application? |
| **Growth Fund Meeting**At what meeting was this project discussed? |
| **Date**When was this application signed off and sent to finance? |

Version 3, March 2023