Northern Ohio District of the Church of the Brethren **Hottle Memorial Fund Grant Application**

The Congregational Commission shall help provide a means of funding projects and programs for congregations of the Northern Ohio District Church of the Brethren an opportunity to establish new projects and ministries or impacting outreach in their communities. The funding for the Hottle Memorial Fund is generated through interest earned from the principal of the fund.

Requests for funds must be submitted to the congregational commission prior to be considered for the next district board meeting with detailed request and accountability of the proposed project. Each request will be carefully and prayerfully considered and acted upon in a timely manner. The Congregational Commission will present their recommendations to the District Board for a final review and action.

DEADLINE: The Congregational Commission will consider applications during their regularly scheduled meetings. Completed applications must be received four (4) weeks before the next scheduled meeting. Meeting dates are posted on our District website: www.nohcob.org. Additionally, attendance is required (physically or electronically) at the Congregational Commission meeting to present your application and answer any questions that may arise prior to the District Board's action.

PROCESS: Complete the attached application (black ink) in full and submit to the District Office. The Congregational Commission will contact you with a date and time to attend their next scheduled meeting. The Commission makes a recommendation to the District Board. The District Board will act on the application and if accepted, the Northern Ohio District Office will issue funding, usually within two weeks of the meeting.

Requirement: All congregations are required to provide at least 10% of total project cost for each funded grant.

Notification of Outcome: The Congregational Commission will contact you by phone/letter/or e-mail.

Please submit applications to: District Office

Application Information

Congregation:	Date	_
Address:		_
	Zip	_
Phone ()	Fax ()	_
Email:		
Pastor:		
Phone ()	Email:	

Church Board	or Leadersh	nip Team Chairperson:	
Phone ()	Email:	
Treasurer:			
Person Comple	eting the Ap	oplication:	
Total Amount	Requested:	\$	
Grant reque	est Data		
Project Name:	:		_
Amount Requ	ested:	Total Cost of Project:	_
Please check to assistance of fo		ow that indicates the type of program that you are requesting	g for
☐ Outreach Mi☐ Program De☐ Project Gran	velopment	nts Programs Spiritual Growth or Spiritual Health	
Project/Vision	on Descri	iption: (use additional space as needed)	
Specifically de	escribe the	grant request.	
Describe to wh	nom this re	equested grant will serve or benefit.	
Are there any	other chui	ch or community organizations involved in this project?	

Describe how the congregational support of project will be achieved.

Give a detailed outline of start date, installation, training etc., any milestones or goals, and completion date:

Note: projects need to begin within 90 days of when the Northern Ohio District Office issues your project funds. If any project is not started within the ninety days, all funds need to be returned to the Northern Ohio District unless special consideration is requested/received from the Congregational Commission.

Project Items	Yea	ar											Yea	ır										
(Example: Project Begins)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	0ct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	0ct	Nov	Dec
1.																								
2.																								
3.																								
4.																								
5.																								
6.																								
7.																								

Project Budget Itemize the costs involved: No request may exceed \$5,000.

	Budgeted	Actual to be completed
Revenue or amount coming in	Actual or Pledged	following grant period
Amount provided by local congregation:		
Must be at least 10% of total cost of project		
Individual Donors		
Community Donors/grants		
Expenses or Costs going out		
Material/supplies		
Contracted Work		
Other Expenses (specify): (upkeep, travel, etc.)		
Total Cost of Project		

Total amount requ	uested
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If this is an ongoing project please describe your plans for sustainability.

	ompletion of the project, provide a writte used with itemized list of fund usage and	
☐ Writing a review/article☐ Teaching a class, works	servant" to the district by (check all for a district publication hop or being a counselor/event leader at rience at a district event/conference	
project has continued to	tems completion of the project, a written report of enhance the life and growth of the churc g changes you would make if you had to	ch.
project was not started or comp	please submit a report with details reg leted, within 30 days of the discontinua	ation.
NOTE: all unused funds must be above explanation.	e returned to the Congregational Com	mission with the
Pastor's Signature		
Chairperson's or Leadership Te	eam (Contact) Signature	
Church Treasurer's Signature _		
	OFFICE USE ONLY	
Upon careful and prayerful review th	e above individual/church request for assista	nce was:
Approved for Resubmittal (amount)	Denied	Returned for
Congregational Commission Chairpe	rson (or Designee) Signature	Date of Action
District Board Chair Signature	(required for amounts above \$3000)	Date of Action