

2024 Mission Impact Fund Application

This application form is designed to be completed by local entities that have been selected by their division to participate in this year's Mission Impact Fund process.

After completing this form, save and upload it to the MIF Portal link that has been provided to your division office.

Project Overview

1. Division or attached organization

2. Name of project

3. Local organization name

The church or other entity that will operate this project

4. Briefly describe the organization's background. Limit 200 words.

Include years of operation, regular income sources, ministry activities and accomplishments

5. Briefly describe the contribution this organization makes to the community.

Limit 200 words.

6. Local organization budget (Current Year).

The operating budget for the sponsoring organization. You will enter the project budget in a different section.

7. Expected project start date.

8. Expected project completion date.

9. Additional notes (optional)

Organization Contact Information

10. Organization contact name

11. Street or postal box

12. City

13. State or province

14. Country

15. Postal code

16. Phone number

17. Email address

Project Budget

18. Total project budget

19. Funds currently available

20. Funds requested from the Mission Impact Fund

21. Other funds available

Project Description

22. Provide a brief description of the problem or issue in the community that this the project will address. Limit 200 words.

23. Provide a brief description of the project's goals and how the project will impact the community. Limit 200 words.

Project Goals

24. A brief list of the specific planned outcomes. Limit 200 words.

25. Provide a brief plan of how the organization will accomplish its goals, including a timeline and project conclusion dates. Limit 200 words.

26. Provide a short list of how the project's success will be determined. Limit 200 words.

Project Funding

27. If project requires additional funding, provide a brief explanation of how you propose to raise additional funds. Limit 200 words.

Signatures

28. Please type the name of the person completing this application.

29. Signature date.
