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| Application for Technology Support Grant | CongregationsCommunity Ministries |

*Please refer to our website for policy:*[*www.united-church.ca/leadership/church-administration/capital-assistance-programs*](http://www.united-church.ca/leadership/church-administration/capital-assistance-programs)*.*

* Maximum grant amount for up to $1,500 matching grant per application. Grants are reserved for modest-income congregations and ministries with unrestricted funds of less than $37,500.
* Applications are to be approved by your regional council before the Financial Support Group (FSG) can consider you for funding. Keep a copy of this application for your records.
* Supporting documents must accompany your application:
	+ Financial Statements (Income Statement, Budget sheet, etc)
	+ Brief description of the project
	+ Quotes and estimates
	+ Charitable Status printout

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| **Applicant’s Contact Information** |
| Pastoral charge  |      # of preaching points #       |
| Name of applying congregation or community ministry | Name:       |
| Mailing address:       |
| City:       | Province:       | Postal code:       |
| Contact person:       | Phone:       |
| E-mail:       |
| Charitable Status No.       |
| Regional council:       |

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| **Financial Plan for Equipment** |
| Total cost | $       | Have you received a Technology Support Grant in the past? [ ]  **yes** [ ]  **no**Approval date (mm/yy)      Approval amount $      Amount drawn to date $       |
| Cash on hand | $       |
| **Grant amount**  | **$** |
| Balance  | $       |
| Restricted Funds: $      Unrestricted Funds: $      |
| Have you purchased the technology? [ ]  **yes** [ ]  **no** What equipment will be purchased?      Comments:       |

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| **Local Mission Unit Action** |
| It was moved by and seconded by and carried that the trustees/board of be authorized to make application to Finance (FIN) for a Technology Grant of $ \_\_\_\_, and to apply to regional council for formal approval. |
| *Date of meeting* | *Signature of Chairperson or Secretary* |

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| **Regional Council Action** (if applicable) |
| The foregoing application was duly considered at a meeting of Regional Council and approved. |
| *Date of meeting* | *Signature of Secretary of Regional Council* |