



Dean and Keitha Thomson Mission Grant Application

Name of Church/Individual \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Hosting Church/Ministry/Organization \_\_\_\_\_

Name of Mission Work \_\_\_\_\_

Location of Mission Work \_\_\_\_\_

Date of Mission Work \_\_\_\_\_

The amount you are requesting from this grant: \$ \_\_\_\_\_

Please provide materials that include:

- a. Narrative with details about the mission work including purpose, plan, and significance of work
b. Timeline of work and related expenses and funding (please include all sources of funding)
c. Your calling to this mission

Grants are renewable up to three years within a five-year period contingent upon the availability of funding sources and the quality and scope of the project.

Please check: [ ] 1st year application [ ] 2nd year application [ ] 3rd year application

Does your mission relate to the Great Plains United Methodist Conference? Please explain.

\_\_\_\_\_
\_\_\_\_\_

Is a Foundation grant necessary for you to participate in this mission? [ ] Yes [ ] No

Please explain \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

