

**CHURCH DEVELOPMENT/EVANGELISM  
GRANT APPLICATION**

**Objective: To increase church growth in the form of membership and spiritual development.**

**Name of the Congregation:**\_\_\_\_\_

**Address:**\_\_\_\_\_

**Telephone:**\_\_\_\_\_ **E-mail**\_\_\_\_\_

**Name of Contact Person**\_\_\_\_\_

**Daytime Telephone Number of contact Person**\_\_\_\_\_

**Grant Amount Requested:**\_\_\_\_\_

**Please describe the nature and goal of the ministry/project.**

**How does this ministry project have the potential to increase the number of participants in the life of your congregation's worship and service?**

**What portion of the ministry/project will be paid by the amount requested? Can your plan be completed without being fully funded by this grant?**

**Are the funds being requested for a totally new project or will they be used to expand an existing project? Please explain.**

**What additional information would you like for the committee to have in our consideration of your proposal?**

**Date Request Approved by the Session:\_\_\_\_\_**

**Signature of Moderator or Clerk:\_\_\_\_\_**

**Church Development And Evangelism Committee  
Presbytery of Transylvania  
2480 Fortune Drive Suite 140  
Lexington, KY 40509**