EPISCOPAL DIOCESE OF CENTRAL PENNSYLVANIA
BISHOP’S MISSIONAL GRANT APPLICATION

PLEASE REFER TO GRANT DIRECTORY LOCATED ON DIOCESE WEBSITE FOR ADDITIONAL INFORMATION.

One application may be used for multiple grant requests. Preferable method of submission is via email to clinder@diocesecpa.org. You may also submit application by mail to: The Episcopal Diocese of Central Pennsylvania, Attn: Chad Linder, Canon for Finance and Operations, 101 Pine Street, Harrisburg, PA 17101. If you have any questions, please feel free to email or call Canon Linder at (717) 236-5959 (ext. 1107) or (717) 968-5550.

The Bishop’s Missional Grants are designated for: (1) outreach projects that are directed to providing food, shelter, clothing, healthcare, and educational development for underserved children and adults or (2) to support congregations, individuals, and small groups in exploration of new and bold ways of serving God. Priority is given to projects that are NEW or are significant expansions of existing projects.

SECTION I : GENERAL INFORMATION (Required of all applicants)

PARISH: ____________________________________________    APPLICATION DATE: ____________

ADDRESS: _________________________________________________________________________________

CITY: _________________________________________  STATE: __________  ZIP CODE: __________________

CONVOCATION: ____________________________________________________________________________

Primary Contact for Grant: ________________________________ Title: ______________________________

Primary Contact Phone: ___________________  Email: ____________________________________________

Vestry Approval: YES _________  NO _________   DATE: _________________________________________

Project Name (If Applicable): _________________________________________________________________

Parish Priest: ______________________________________   Email: _________________________________

Senior Warden: ____________________________________   Email: _________________________________

Junior Warden: ____________________________________    Email:_________________________________

Treasurer: ________________________________________    Email: _________________________________

Previous Yr. Fair Share Assessment: ________________  Current Yr. Fair Share Assessment: ______________

Previous Yr. Fair Share Pledge: _______________    Current Yr. Fair Share Pledge: _______________

Did Parish Fulfill Pledge: Yes ___   No ___           Is Parish Current on Pledge: Yes ___   No ___

Is your parish participating in Shaped By Faith?  Yes ___   No ___
SECTION II: REQUEST

GRANT AMOUNT REQUESTED: $________________    TOTAL PROJECT COST: $________________

SECTION III: PLEASE LIST ANY FUNDING YOUR PARISH HAS RECEIVED FROM THE DIOCESE IN THE PREVIOUS THREE YEARS.

Source: _________________________________  Amount: _______________ Date: __________
Project/Ministry Name: ______________________________________________________________

Source: _________________________________  Amount: _______________ Date: __________
Project/Ministry Name: ______________________________________________________________

Source: _________________________________  Amount: _______________ Date: __________
Project/Ministry Name: ______________________________________________________________

Source: _________________________________  Amount: _______________ Date: __________
Project/Ministry Name: ______________________________________________________________

Source: _________________________________  Amount: _______________ Date: __________
Project/Ministry Name: ______________________________________________________________

SECTION IV: NARRATIVE & GRANT SPECIFIC DETAILS

Please include the following with your application:

  • Briefly tell us about your congregation and community.
  • Nature of the project – What will happen and where will it take place?
  • Participants in the project
  • Length of the project
  • Desired outcomes
  • Statement of how the project will serve God’s Mission of restoration and reconciliation
  • Budget for the project including documentation of other sources of income – or none
  • How will the ministry be sustained beyond the grant period?
  • Endorsement of the project by parish vestry as evidenced by a vestry vote and letter of certification by the person submitting the application. Discussion, approval, or not, must be memorialized in the minutes of the vestry meeting in which this discussion was held.

Notes / Comments: _________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

DCPA Grant Application - Rev. 09/13/2019
SECTION V:

ALL PARISHES SUBMITTING APPLICATION FOR A GRANT OR LOAN MUST PROVIDE THE FOLLOWING DOCUMENTS WITH THEIR APPLICATION.

1) Copy of Vestry minutes that include discussion and approved motion supporting request.
2) Detailed budget for the upcoming year.
3) Most recent YTD Income/Expense Statement and previous year’s Income/Expense Statement
4) Most recent YTD Budget vs. Actual Statement and previous year’s Budget vs. Actual Statement (this may part of your Income/Expense statements.)
5) Current Balance Sheet – this must include ALL cash and investment assets, including any “endowment” accounts. The balance sheet must also include how the assets are either 1) unrestricted, 2) vestry restricted, or 3) donor restricted (true endowment)
6) Most recent investment account statement(s).
7) Most recent audit report – if an audit was performed. If an audit has not been performed in the past three years, please provide the date of the last audit.

*** INTEROFFICE ONLY ***

Date Received: _____________ Scanned: ______________
Documents Received: Project Narrative: ____ Detailed Project Budget: ____ Vestry Doc.: ____
Balance Sheet: ____ Most Recent Parish Audit: ____ Current Yr. I/E Stmt.: ____ Previous Yr. I/E Stmt.: ____
Current Yr. B/A: ____ Previous Yr. B/A: ____
Date Reviewed by Canon of Finance & Operations: ______________
Approved by Grant Manager / Committee: Yes ____ No ____ Date: ______________
Approved by Finance Committee: Yes ____ No ____ Date: ______________
Award Amount: $_______________
Parish Notification: __________________________________________________________________