

# Change for Children

## *Grant Information and Guidelines*

- Grants are available to support new and existing ministries with children from birth through age twelve and their families, especially families who are economically disadvantaged.
- Program grants are not for construction or renovation of buildings or playgrounds; they are for program support only.
- Holston Conference churches, missional hubs, and related United Methodist agencies are eligible to apply for these funds.
- The *maximum* Program Grant is \$2500.
- No program grant will be made where the grant funds constitute more than 2/3 of the total program cost.
- **Priority consideration will be given to first time applicants for new ministries or enhancement of existing ministries.**
- Funds are granted twice yearly as funds are available. Application deadlines are **February 15** and **August 15**. Grant recipients will be notified in writing within 90 days of the deadline.
- **All applications must be filed on the approved Program Grant Application Form with all required signatures. Attach additional sheets as needed. A copy of your current Safe Sanctuary Policy is required.**
- All Application Forms should be requested from and returned to Change for Children, Holston Conference of the UMC, P.O. Box 850, Alcoa, TN 37701-0850 no later than February 15 or August 15. **No Exceptions.**
- Grant recipients may apply again in two years.
- If a grant is awarded, ***a written summary report is required***. The evaluation form will be included with your award. Failure to complete the summary report will disqualify any future grant applications. We also ask you to post information and if possible, photos of the ministry on the Holston Conference Children's Ministry Facebook page.

**Return application by February 15 or August 15 to:**

Change for Children  
Holston Conference Center  
P. O. Box 850  
Alcoa, TN 37701-0850

FAX: 865-690-3162

Phone: 866-690-4080

E-Mail: [Susangroseclose@holston.org](mailto:Susangroseclose@holston.org)



# Change for Children Grant Application

## *Contact Form and General Information*

PLEASE PRINT CLEARLY

District \_\_\_\_\_

Church / Missional Hub \_\_\_\_\_

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

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

Contact Name/Position \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

**Name of Project** \_\_\_\_\_

**Amount Requested** \_\_\_\_\_

Date Application Submitted:

\_\_\_\_\_

**APPLICATION DEADLINE:  
February 15 or August 15**

Is this a **new** or **existing** ministry? (circle one)

If this is a new ministry, what is the proposed beginning date? \_\_\_\_\_

If this is an existing ministry, how will the grant expand this ministry? \_\_\_\_\_

Is this planned to be a **short-term** or **on-going** ministry? (circle one)

Ages primarily to be served: (circle)      0-6      6-12      ALL ages (0-12)

**Type of ministry to be funded by this grant:**

Please select the **primary** area through which the funding will be applied.

- \_\_\_\_\_ Adoptive/Foster Care Ministry
- \_\_\_\_\_ After-school program
- \_\_\_\_\_ Basic needs (food, clothing, etc.)
- \_\_\_\_\_ Child Care/Weekday Care
- \_\_\_\_\_ Christian Education
- \_\_\_\_\_ Community Outreach (takes place off church property)
- \_\_\_\_\_ Homeless Ministry
- \_\_\_\_\_ Mentoring
- \_\_\_\_\_ Ministry to children of prison inmates
- \_\_\_\_\_ Music
- \_\_\_\_\_ Weekly children's program (inclusive of Bible study, recreation, fellowship, etc.)
- \_\_\_\_\_ Worship
- \_\_\_\_\_ Other - please describe \_\_\_\_\_

**Applicants should seek to do one or more of the following:**

- Engage with children and families in their communities and implement a “personal” form of ministry, giving special attention to the needs of children.
- Establish relationships with children and families who are poor and/or disadvantaged in their communities.
- Develop ministries at the local level that empower parents and caregivers of children.
- Emphasize inclusion of children in worship, evangelism, educational and/or missional programming.
- See children as participants in ministry as well as recipients of ministry.
- Recruit potential adoptive and foster families for children.
- Reflect on where and in what way God is leading them to respond to the call of the Gospel as a result of the Annual Conference’s current area of focus.

**Please answer the following questions on a separate sheet.**

1. Describe the ministry to be funded by this grant and how it will address one or more of the above needs.
2. Why is this grant necessary for addressing this need?
3. What other resources have been explored within and outside of the local church budget to meet this need? What other funds are available?
4. How does this proposed ministry express the Gospel in responding to the needs of children and their families who are economically disadvantaged?
5. How does this proposed ministry build relationships with families that ultimately leads to a relationship with Jesus Christ and your faith community?
6. How will the people in your congregation or missional hub participate in this ministry?
7. How will children in your congregation or missional hub participate in this ministry?

**Church / Missional Hub Profile** (Last calendar year)

Total Membership/Churches \_\_\_\_\_ Average Attendance in Worship \_\_\_\_\_ Sunday School \_\_\_\_\_ How  
your congregation or Missional Hub participated in collection of Change for Children?

**Financial Profile of the ministry for which funds are requested:**

➡ **Important:** Attach a detailed copy of the Projected Budget for this ministry, *including all sources of income*.

Has your congregation or Missional Hub received funding from Change for Children Grant? \_\_\_\_\_

If so, what year? \_\_\_\_\_ Amount of grant? \_\_\_\_\_

**Safe Sanctuaries Policy:** Please attach a copy of your current Safe Sanctuaries policy.

**Failure to furnish a current policy (reviewed within the last year) will disqualify the application.**

Our Safe Sanctuary policy was last reviewed/updated on \_\_\_\_\_. (Date)

Signed \_\_\_\_\_

*Pastor*

Signed \_\_\_\_\_

*District Superintendent*

Signed \_\_\_\_\_

*Applicant/Contact*

Office Use	Date Received _____
Safe Sanctuary Policy Updated	_____