## EMBA-logo (400x187)Digital Mission Grant (DMG)Application Form

## January 2021

## *Please read the Guidance Notes before completing this form.*

###### **CHURCH INFORMATION** (see note 1)

|  |  |
| --- | --- |
| Church |  |

|  |  |
| --- | --- |
| Contact Person |  |
| Position within the church |  |
| Address |  |
| Daytime contact number |  |
| E-mail |  |

|  |  |
| --- | --- |
| Name of project |  |
| Grant requested\**\*Max £500* | £ |
| Grant request agreed by *(Delete as appropriate)* | Deacons/Leadership Team meeting held on (date)Church Members Meeting held on (date) |

|  |  |  |
| --- | --- | --- |
| **HOME MISSION GIVING** | **Amount** **(£)** | **Percentage of****church total income** |
| **Current year’s intentions** |  |  |
| **Last complete year** |  |  |
| **Previous complete Year** |  |  |

**SAFEGUARDING**

The EMBA Directors have a responsibility when providing grant funding to churches to ensure that the recipient body has in place adequate safeguarding practices.

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| **Please confirm that the church has a current and active Safeguarding Policy in place which has been put together using BUGB guidelines. Please provide the date when the policy was last reviewed.** |
|  |
| **Name of the ‘Designated Person responsible for Safeguarding’** |
|  |
| **Name of the ‘Safeguarding Trustee’** |
|  |

###### **THE PROJECT** (see note 2)

|  |
| --- |
| Brief Description of the Digital Mission Project |
|  |
|  |
| The nature of the project and how it fits into your church’s mission strategy.  |
|  |

###### **COSTS** (see note 3)

**3.1 Costs of the digital mission project** *(please itemise)*

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL** |  |
|  |  |
| **Level of grant requested** |  |
| **Amount funded by the church** |  |
| **Money to be raised elsewhere\*** |  |
|  |  |
| *\* Please give details of how this is to be raised* |

|  |  |
| --- | --- |
| **3.2** | If relevant, how do you propose to finance the ongoing work of the project? |
|  |
| **3.3** | If your accounts indicate that you have the funds to resource this project yourself, please explain why you are applying for this grant  |
|  |
| **3.4** | Please indicate when you would need the grant to start (MM/YY) |
|  |

**Please provide church bank details for payment of any grant agreed**.

|  |
| --- |
| **Church Bank Account Details**  |
| Name of bank: |  |
| Name on account: |  |
| Account number: |  |
| Sort code: | * -
 |

**Signed …………………………………………………… (Applicant)**

 **…………………………………………………… (Minister or Church Officer)**

**On behalf of …………………………………………………………………………………………………. Baptist Church**

**Date ……………………………………………………**

###### **ADDITIONAL INFORMATION** (see note 4)

**Please enclose the following:**

* A copy of the church’s current mission strategy
* A copy of the church’s most recent annual accounts
* A copy, if appropriate, of the project’s most recent annual accounts
* Any further information you feel is appropriate.

Once completed, please email this form together with the addditional information required to Becky Nicholls (EMBA Administrative Support) at bnicholls.emba@gmail.com