## EMBA-logo (400x187)Mission Project Grant (MPG) Application Form

## Amended February 2025

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

###### **CHURCH INFORMATION**

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

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

|  |  |
| --- | --- |
| Name of project |  |
| Grant Requested | £ |
| 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.

|  |  |
| --- | --- |
| **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’** | |
|  | |
| **Please confirm that all leaders and volunteers involved in the project (*as appropriate*)** | |
| will have the necessary checks through the Disclosure & Barring Service (DBS check) |  |
| will attend Safeguarding Training (L2 and L3 as appropriate) every four years |  |

###### **THE PROJECT**

|  |
| --- |
| Brief Description of the project |
|  |
|  |
| The nature of the project and how it fits into your church’s mission strategy. *(If your church has a written mission strategy please enclose a copy with your application.)* |
|  |

###### **COSTS**

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

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL** |  |
|  |  |
| **Level of grant requested** |  |
| **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**

**Please enclose the following:**

* A copy of the church’s most recent 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 Admin Lead) at [becky.nicholls@embaptists.org.uk](mailto:becky.nicholls@embaptists.org.uk)