



## Advent Endowment Fund Grant Application Guidelines

### Why does Advent have an Endowment Fund?

This fund was created in the mid 1990's to give our church the opportunity to broaden our support of deserving but underfunded ministries in our own local community, or nationally, or internationally. It has now become a generous grant-giving ministry of our church. The **Endowment Fund** supports education and initiatives that promote outreach, growth, and services to the marginalized through a wide variety of ministries. Grants are awarded to programs that foster spiritual growth, social justice, leadership development, and creative ministry models that reflect our mission. Certain ministries or needs within Advent qualify for grants, but nothing that is in the budget can be considered.

### Who Can Apply:

An organization or an individual representative (member or non-member of Advent) who is seeking financial support for mission-driven projects that address urgent needs, create lasting impacts, and serve or engage the community in meaningful ways can apply. A member of Advent does not need to be a participant in the ministry to make an application on its behalf.

### How and When to Apply:

The one-page application form is available online at [ENDOWMENT@ALCTX.ORG](mailto:ENDOWMENT@ALCTX.ORG) or contact the church office or a current board member. Applications, which may be submitted at any time; however, please note, applications must be submitted for approval *before* an event takes place or funding is needed, and no later than first day of the new quarter.

Grant awards generally range from \$300 - \$5,000.

### Complete the Form:

The simple form can be submitted online, mailed to the church office, or emailed to [AdventLC@alctx.org](mailto:AdventLC@alctx.org). In addition to the form, a budget or projection of total expenses and other sources of financial support also must be submitted. Any other supporting documents such as a cover letter, brochures, references, and websites that will help the Board in its consideration should be submitted at the same time as the application.

### Recipient Responsibilities:

All recipients of grants are asked to send a follow-up summary that can be shared with our congregation via the newsletter. Pictures are also helpful. Unless the grant is a private or sensitive subject, we inform our congregation about your ministry as well.

Questions can be addressed to [Endowment@alctx.org](mailto:Endowment@alctx.org).

***See page 2 for the application form***



## Advent Lutheran Church Endowment Fund Application for Funds

**Board Use Only**

Application No.:

Date Received:

**Send completed application form to [ENDOWMENT@ALCTX.ORG](mailto:ENDOWMENT@ALCTX.ORG)**

The Endowment Fund Board meets on a quarterly basis. We accept applications at any time, but requests must be submitted by the first day of the quarter and must be BEFORE the event takes place or before funds are needed.

Use attached pages as needed to complete this information

|                                                                                                                                                                                                                                                                                                                             |         |        |                     |              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|---------------------|--------------|
| <b>Submitted By:</b>                                                                                                                                                                                                                                                                                                        |         |        |                     | <b>Date:</b> |
| <b>Contact's Name &amp; Title:</b>                                                                                                                                                                                                                                                                                          |         |        |                     |              |
| <b>Contact's e-mail:</b>                                                                                                                                                                                                                                                                                                    |         |        |                     |              |
| <b>Contact's Address:</b>                                                                                                                                                                                                                                                                                                   | Street: |        |                     |              |
|                                                                                                                                                                                                                                                                                                                             | City:   | State: | Zip:                |              |
| <b>Contact's Phone:</b>                                                                                                                                                                                                                                                                                                     | Home:   |        | Work:               |              |
| If funded, Name and address where the funds should be sent, Provide the name of the person or organization to be on the check                                                                                                                                                                                               | Name:   |        |                     |              |
|                                                                                                                                                                                                                                                                                                                             | Street: | City:  | State:              | Zip:         |
| How did you learn of the Advent Endowment Fund?                                                                                                                                                                                                                                                                             |         |        |                     |              |
| <b>Amount Requested</b>                                                                                                                                                                                                                                                                                                     |         |        | <b>Date Needed:</b> |              |
| <b>IMPORTANT: Attach a budget or explanation of the person or organization's internal funding and total expenses for this project. List specifically how the Endowment Funds will be used. To help promote our ministry, every recipient will be asked to submit follow up information and graphics to the Board Chair.</b> |         |        |                     |              |
| <b>Purpose of This Request:</b><br><i>Explain why these funds are being requested (scholarship, debt reduction, part of a larger fundraising effort, ongoing mission activity, etc.)</i>                                                                                                                                    |         |        |                     |              |
| <b>Project or Need:</b> <i>Provide specific information on the impact the funds will have on the local, national and/or international community; attach related supporting documents, publications, websites, etc.</i>                                                                                                      |         |        |                     |              |
| Who are the primary benefactors from the funds being requested?                                                                                                                                                                                                                                                             |         |        |                     |              |
| What other sources of funds are being sought?                                                                                                                                                                                                                                                                               |         |        |                     |              |

**FOR ENDOWMENT BOARD USE ONLY**

|                                       |                                                                                                                                                                                  |                                 |              |
|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------|
| <b>Summary of Board's Discussion:</b> |                                                                                                                                                                                  |                                 |              |
| <b>Board Decision:</b>                | <input type="checkbox"/> Approved                                                                                                                                                | <input type="checkbox"/> Denied | <b>Date:</b> |
| <b>Amount of Funds Granted:</b>       |                                                                                                                                                                                  |                                 |              |
| <b>Grant Category:</b>                | <input type="checkbox"/> National & International Missions <input type="checkbox"/> Local Missions<br><input type="checkbox"/> Scholarship <input type="checkbox"/> Other: _____ |                                 |              |
| <b>Board Chairperson or Designee</b>  | Name:                                                                                                                                                                            | Signature: _____                |              |

**FOR ACCOUNTING USE ONLY**

|                              |  |              |              |
|------------------------------|--|--------------|--------------|
| <b>Paid to the Order of:</b> |  | <b>Ck #:</b> | <b>Date:</b> |
|------------------------------|--|--------------|--------------|