

## **Spirit of Joy Lutheran Church Mission Endowment Fund Grant Application Instructions**

The Mission Endowment Fund was established for the purpose of providing partners and friends the opportunity to make charitable gifts to Spirit of Joy Lutheran Church that will become a permanent source of financial support above and beyond the Annual Budget of the Congregation.

### **Eligibility**

Grants may be awarded to fund projects to help or enhance programs, projects or activities that are innovative and effective.

These ministry grants must work toward fulfilling the mission and vision of Spirit of Joy Lutheran. Grants are made for one-time funding needs. Grants will not be awarded to outside organizations. The Spirit of Joy Mission Endowment Committee reserves the right to not seek or allow grants in any given year due to financial and/or economic circumstances.

Grants are available in relation to each existing sub-fund of the Mission Endowment Fund. Funds and their purpose will be made available at the time applications open each year.

### **How to Apply**

1. Complete the grant application form and attach a brief narrative statement.
2. A separate application must be completed for each project. If more than one application is submitted, indicate which project has priority.
3. Digital or original signatures are required.
4. Typically, grants may be awarded on an annual basis with deadlines of October 1 of each year. Grants may be awarded in times of emergency or unforeseen circumstances that have time sensitive deadlines.

Applications should be submitted online, emailed, mailed or delivered to:

Spirit of Joy Lutheran Church  
2208 W. LaQuinta St.  
Sioux Falls, SD 57108  
605-333-2004  
[heather.spiritofjoy@gmail.com](mailto:heather.spiritofjoy@gmail.com)

The Mission Endowment Committee will acknowledge receipt of all completed grant applications.

### **How Proposals are Processed and Grants Awarded**

- Endowment Committee shall receive all grant applications.
- Funding decisions are determined on a case-by-case basis and are dependent on funds available and the merits of each request.
- Priority consideration will be given to grants that will be for items that are not funded through the General Fund. Applications for ministries will need to demonstrate a strong and meaningful connection to fulfilling the mission and ministry of Spirit of Joy.

- The Mission Endowment Committee will make recommendations to the Leadership Team of Spirit of Joy. The Leadership Team has final say in the approval of applications and disbursement of funds. There are several possible recommendations/actions that may be taken regarding any application: 1) The request may be approved and recommended for either full or partial funding; 2) The request may be approved for a “challenge” or “matching” grant; 3) Action on the request may be tabled and additional information requested; 4) The grant may be denied.
- Each applicant will be advised of the action taken by the Mission Endowment Committee and Leadership Team.
- The Mission Endowment Committee reserves the right to not seek or allow grants in any given year due to financial and/or economic circumstances.
- If you have questions, please contact either the Chair of the Mission Endowment Team.

### **Grant Proposal Narrative Guidelines**

Along with the application form, please submit a brief narrative that addresses the topics described below. Please limit narrative to no more than two single-sided pages.

#### **Project Description**

1. If this is a capital expenditure, please describe the issue or problem to be addressed with grant funds. Identify how the expenditure will improve or enhance the overall operation of Spirit of Joy.
  - a. If this is a time sensitive project, please explain why.
2. If this is a grant proposal for a ministry project, please include the following information:
  - a. Is this a new or existing project?
  - b. What is the target audience of the project?
  - c. Describe how this project will contribute to the health, vitality, and ministry effectiveness of the church.
3. List the main goals/objectives of the purchase or project, a plan to document progress, and method to measure results.
4. Provide a timeline for implementation.

#### **Other Notes:**

The Mission Endowment Committee may be reviewing multiple proposals in each cycle. We strongly recommend that proposals be concise and address the topics outlined above.

Questions? Please contact the Church Office at (605) 333-2004.

## Spirit of Joy Lutheran Church Mission Endowment Application

**Instructions:** Submit your proposal no later than October 1 for consideration. Complete the application form below and include a project narrative.

**General Information:**

Project Name: \_\_\_\_\_

Sub Fund or Ministry Area: \_\_\_\_\_

Main Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Basic Request Information:**

Amount requested: \_\_\_\_\_

Total project budget: \_\_\_\_\_

Are there other funding sources for this project?    Yes    No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Proposed project starting date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Type of funding requested:

- Matching
- Challenge
- Grant
- Scholarship

Does this project require approval from the Leadership Team (in excess of \$10,000):    Yes    No

Is the project a matter of safety, security, or immediate need?    Yes    No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Has it been approved by ministry area staff and Ministry Team?    Yes    No

Does this project extend beyond one year?    Yes                            no

If yes, how will this project be funded in the future?

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Please complete a Project Description, any supporting documentation and the Project Budget form with this application.

**The information presented in this application and narrative is true and factual.**

\_\_\_\_\_  
**Name of person submitting request**

\_\_\_\_\_  
**Date**

**Application Check List - Endowment Committee ONLY**

Completed Grant Application

Completed Project Description and  
Project Budget

Date received: \_\_\_\_\_

Received by: \_\_\_\_\_

Review Date: \_\_\_\_\_

Recommendation of Mission Endowment Committee:

Grant Approved for \$\_\_\_\_\_ to be awarded by \_\_\_\_\_ date.

Request approved for Challenge or Matching grant. \$ \_\_\_\_\_ Endowment will  
Match

Action on the request is tabled for review and/or information

Grant request denied

Leadership Team  approved or  disapproved Mission Endowment  
Committee recommendation.

Requester was notified on: \_\_\_\_\_ by: \_\_\_\_\_

## Project Budget

Income	Amount
Amount Requested from Endowment	\$
Other Sources of Income:	
	\$
	\$
	\$
Total Anticipated Income	\$

Expenses and Material Purchases	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Sub Total	\$

Personnel Costs (Labor/Salary/ etc.)	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Sub Total	\$

Other Expenses:	
	\$
	\$
	\$
	\$
	\$
	\$
Sub Total	\$
Grand Total	\$

