

SOTV BENEVOLENCE LEADERSHIP TEAM GRANT APPLICATION GUIDELINES

PURPOSE: The Benevolence Leadership Team will allocate funds in service of our mission: to distribute the benevolent giving of SOTV to mission work representing local, national, and international causes.

ELIGIBILITY: The following applicants are eligible to apply for funds:

- SOTV staff and members

- Organizations that serve our community

- Organizations that serve SOTV members

- Service projects that have been approved by SOTV staff or leadership teams

CRITERIA: The following criteria will be considered:

- Alignment with the vision of the church

- Financial need not likely to be met by other sources

- Impact of the funds on SOTV members or service project

- Other funding streams

ACCOUNTABILITY: The funds allocated by the Benevolence Team must be utilized in accordance with the proposed project time. Additionally, all funds must be fully accounted for at the end of the timeline with any unused funds returned. The team will determine accountability guidelines on a case-by-case basis.

COMMUNICATION: The Benevolence Team staff or serving pastor will serve as a communication link between applicants and the Benevolence chair and members.

DUE DATE: Applications must be received by the 15th of the month to be considered at the next Benevolence meeting. Meetings are typically held at the end of the month, September through May.

WHERE TO SEND THE APPLICATION: Benevolence requests should be emailed to [Pastor Julie Wright](#) and to the Benevolence Leadership Team lead, [Brendan Henry](#).

**SOTV BENEVOLENCE LEADERSHIP TEAM
GRANT APPLICATION**

Applicant Name(s):

Date of Application:

Organization:

Address of Organization (if other than SOTV):

Email:

Phone:

Project Title:

Project Description (or attach documents):

Number of People Served:

Project Time Line:

Amount Requested:

Project Budget:

Will you accept partial funding? If yes, how would partial funding impact your project?

Are there additional sources of funding? If yes, describe:

Have you applied for Benevolence funding in the past? If so, was it a one-time project or an ongoing request?

Do you currently have a relationship with SOTV? If so, please provide contact information for the person or group you have worked with in the past.

Applicant's Name: _____

Signature: _____

Staff: _____

Date received: _____