ERCIL CADY GRANT APPLICATION COVER SHEET

Name of Individual, Local Church or Ministry Team:

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Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip Code \_\_\_\_\_\_\_

Signature of person making application (recipient of funds)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Pastor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of District Superintendent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Submission of application deadline is August 14, 2017. Awardee(s) will be notified by September 1, 2017.

Please send completed application & any supportive documentation to:

Cady Grant Review Team, Upper New York Conference

% Director of Connectional Ministries

7481 Henry Clay Blvd.

Liverpool, NY 13088.

Fax: [(315-898-2198](tel:(315)%20898-2198))

Email: [dcmoffice@unyumc.org](mailto:dcmoffice@unyumc.org)

CADY GRANT APPLICATION

Please provide a summary of the proposed education/ministry/program/event. The proposal must demonstrate:

1. The education/ministry/program/event is faith based.
2. A direct benefit for an African American or Native American person or persons in need.
3. A need for such an educational/ministry/program/event.
4. An itemized expense report (if appropriate).

Application should be a brief synopsis limited to one page:

1. Education/ministry/program/event name.
2. Summarize:
   1. Who is the request for (or who would attend if this is a group event)
   2. Why (individual or community need)
   3. What the person(s) will do/learn/experience
   4. When (time frame)
   5. Where (location of education/ministry/program/event)
3. What do you hope to accomplish?

State the amount requested from the Cady Grant fund. If a ministry/program/ event, please submit a one page financial report of expenses.

Applications must be typewritten/word processed with no more than 3 pages (cover sheet, one page proposal, and financial report if appropriate). Faxes and email proposals are permitted.

Proposals are to be submitted to:

Cady Grant Review Team, Upper New York Conference

% Director of Connectional Ministries

7481 Henry Clay Blvd., Liverpool, NY 13088.

Fax: [(315-898-2198](tel:(315)%20898-2198))

Email: [dcmoffice@unyumc.org](mailto:dcmoffice@unyumc.org)

July 21, 2017