



## **Presbytery of Northeast New Jersey Congregational Mission Grant Application Information**

The Presbytery of Northeast New Jersey will make grants of up to \$4000 available to congregations to help expand and enhance your work and ministry.

### **The Grant Guidelines**

Applications should be received for the Fall 2024 funding cycle by October 15th.

Each congregation is eligible for one grant per calendar year.

Applicants will have a response from the Congregational Mission Team by or before November 15, 2024.

All applications will be thoughtfully reviewed and discussed. All grant amounts will be determined by the Congregational Mission Team based on funds available, perceived community need, church involvement, number of applications received, and any other special conditions.

Any questions or concerns may be directed to the Congregational Mission Team through:

Elder Jerome Bishop Lane Jr.  
Community Ministry Organizer  
Presbytery of Northeast New Jersey  
147 Broad Street  
Bloomfield, NJ 07003  
(973) 873-1181  
[jerome@pnenj.org](mailto:jerome@pnenj.org)



**Congregational Mission Grant Application  
(Fall 2024)**

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

Name of Congregation \_\_\_\_\_

Contact Person \_\_\_\_\_ Email Address \_\_\_\_\_

Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Program Name \_\_\_\_\_

Check One: \_\_\_\_\_ Initial Application \_\_\_\_\_ Application Renewal

Sponsoring Session \_\_\_\_\_

Grant Amount Requested \_\_\_\_\_

Has the session approved the grant application? \_\_\_\_\_

Please describe your program. How was it developed?

Who was involved? How have you determined that the project meets the mission of your congregation and/or needs of your community?

What are the primary goals of your program?

Describe how this program will be implemented. Who will be involved in the implementation?

Who will benefit from this program? How?

What impact do you anticipate for the sponsoring congregation?

What is the timeline for implementation of your program?

How will you evaluate the effectiveness of your program?

What is the estimated total budget for the program? \_\_\_\_\_

What other sources of funding will be used? Please include any Presbyterian sources.

How will the sponsoring church contribute to the program (dollars, in-kind, volunteer)?

Please include a copy of the sponsoring church's budget for the current year.

Signed (Name of Person Completing Application)

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Clerk of Session

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Date Program was Approved by Session

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