

1850 North Grand Avenue West  
Springfield, IL 62702  
Phone: (217) 793-1802 Fax: (217) 793-9454  
E-mail: [cef@cidlcms.org](mailto:cef@cidlcms.org)  
Website: [www.cid-cef.org](http://www.cid-cef.org)

## **MINISTRY OUTREACH GRANT PROGRAM**

**“The mission of the Church Extension Fund is to provide opportunity to make funds available in support of the great Commission.” (Matthew 28)**

### **INTRODUCTION:**

The CEF Ministry Outreach Grant Program has been established by the CEF Board of Trustees for the use and benefit of the congregations and agencies of the Central Illinois District to help carry out their mission and ministry. This program offers a unique opportunity for the Church Extension Fund to provide funds beyond its basic purpose of providing low-cost loans to the Central Illinois District and its congregations.

**PURPOSE:** In addition to providing low-cost loans, this program allows CEF to provide funds for deserving endeavors. CEF would like to make funds available to congregations, organizations, boards, committees or even individuals for programs which would benefit the Church in its mission, ministry and outreach. New and innovative opportunities which respond to issues and concerns confronting the District and its congregations will receive special consideration.

**GOALS:** The CEF Ministry Outreach Grant Program offers opportunities to:

- Assist the District, its congregations, organizations and individuals in implementing the Great Commission: “Go ye, therefore, and make disciples of all nations.”
- Provide start-up funds for projects to be funded later by other means.
- Encourage innovative ideas that could help other congregations or organizations.
- Assist congregations in renewing, evaluating and refining existing ministries.

**CRITERIA:** The following criteria form the basis upon which proposals to the CEF Ministry Outreach Grants Program will be considered and evaluated.

- Presents a ministry consistent with the mission and purpose of the District.
- Holds potential for influencing large numbers of people.
- Is timely – possesses a degree of urgency and appropriateness.
- Is recognized by knowledgeable persons in the field of District to be a valid issue, concern or need.
- Is carried out by a credible and experienced organization and staff.
- Holds high probability for continued support when CEF Ministry Outreach Grant funding has ended.
- Has provisions for evaluation and accountability.

**PRIORITIES:** In addition to meeting the criteria outlined in the foregoing section, the Grants the CEF Board of Trustees make must be relevant to some of the vital issues facing the District and its congregations today. Some of these issues include, but are not limited to:

- Addressing the needs of rural congregations and schools.
- Involving the Youth and our congregations in the mission and ministry of the Church.
- Reaching the unchurched.
- Finding new ways to support church workers and their families.
- Confronting the effects of societal change and technological advancements on congregations and schools.
- Meeting the needs of multi-cultural communities.
- Addressing the growing needs of the elderly within our communities.

### **GRANT CATEGORIES:**

Seed Grants for projects that initiate new models of ministry.

Support Grants to assist or augment projects or programs that minister to a wider or more diverse group and benefit members of area churches and the community.

Professional Development Grants to financially support conferences, seminars, workshops, etc. for the development, training, and encouragement of workers in the Kingdom.

Central Illinois District Special Ministry Grants to support projects proposed and supported by the Central Illinois District Staff and Board.

**TIME LIMITS:** The time limit for completing any Grant project shall be two years from the date of the Grant application approval unless a special exception is granted by the CEF Board of Trustees.

**FINANCIAL LIMITS:** The budgets of the Ministry Outreach Grants Program will be determined annually by the CEF Board of Trustees. This amount may be awarded as one Grant or divided among several Grants. The CEF Board of Trustees will determine the final amount of any approved Grant requests.

**EXCLUSIONS:** Applications generally NOT allowable for CEF Ministry Grant Outreach funding would include, but not be limited to, the following:

- Capital Expenses – buildings, equipment, maintenance or improvements.
- Items already budgeted or programs which would require continued CEF funding.
- Expenses for salaries, benefits, or programs that are a part of a parish or board's present or proposed budget.
- Fund raising campaigns or contributions to endowments.

## **OTHER REQUIREMENTS:**

CEF Ministry Outreach Grant Money will be used only for the approved project. Any surplus grant funds must be returned to CEF.

CEF Ministry Outreach Grants are to be publicly acknowledged by recipients.

A project report is required at the end of the first year of any two-year project and a final Ministry Outreach Grants Evaluation Form must be completed at the end of the project. This form is attached to this application.

Any recipient shall provide any documentation required by the CEF Board of Trustees to verify compliance with the grant.

## **SUBMITTING THE CEF MINISTRY OUTREACH GRANT APPLICATION FORM:**

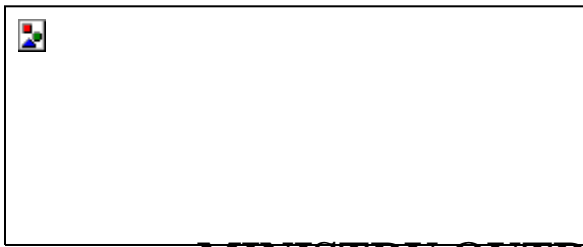
All Ministry Outreach Grant requests must be submitted either on the CEF Ministry Outreach Grants Proposal Form or may be reproduced in the same format. If necessary, additional pages of supporting documentation may be attached.

The CEF Board of Trustees will consider grant applications twice each calendar year. To assure prompt consideration of your application, forward the original signed application to the address below to arrive before one of the following dates: April 1<sup>st</sup> or October 1<sup>st</sup>.

**Mail application to:** CID - Church Extension Fund  
Ministry Outreach Grant Program  
1850 N Grand Ave. West  
Springfield, IL 62702-1626

**Or email application to:** [cef@cidlcms.org](mailto:cef@cidlcms.org)

**Or FAX application to:** 217-793-9454



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## **MINISTRY OUTREACH GRANT APPLICATION**

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**Name of project:** \_\_\_\_\_

**Amount of Grant Requested from CEF: \$** \_\_\_\_\_

**Name of Sponsoring Organization:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Name and Title of person authorized to submit application:** \_\_\_\_\_

\_\_\_\_\_

**Telephone Number of authorized person:** \_\_\_\_\_

If the contact person responsible for the project is different from authorized person submitting the application, please enter their information:

**Contact person name, mailing address and telephone (if different from authorized person above):**

\_\_\_\_\_

\_\_\_\_\_

## **PROJECT DESCRIPTION**

1. Brief description of overall project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. What needs expect to be met by this project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. How has this been determined? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Objectives for this project (please state in specific, achievable, measurable objectives):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Sequence of activities to meet project objectives: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. How will the success of this project be evaluated and measured? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Anticipated time-table for the project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Anticipated number of people participating in the project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Identify primary group benefiting from this project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. State how the applicant will acknowledge and publicize CEF support: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **BUDGET INFORMATION**

**Applicant Support Dollars:** \_\_\_\_\_

**Other Support Dollars:** \_\_\_\_\_

(identify source in #1 below)

**Funds requested from CEF** \_\_\_\_\_

**Total** \_\_\_\_\_

1. Brief narrative statements describing budget and what requested CEF funds will be used for:

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2. Proposed schedule to disburse funds:

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3. Other potential sources from which financial assistance for this project has been or is being sought – *CID-CEF is to be notified of any other grants or potential sources of funding:*

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4. If the project is to be ongoing, what are the applicant's plan for continuing support:

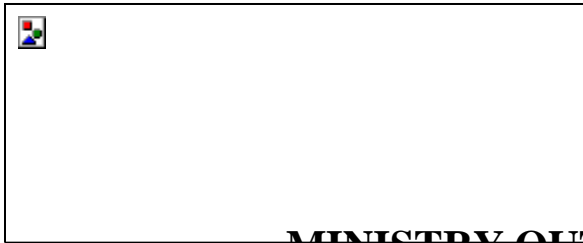
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Authorized Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail application to:** CID Church Extension Fund, 1850 N Grand Ave. West, Springfield, IL 62702  
**or email application to:** [cef@cidlcms.org](mailto:cef@cidlcms.org) **or FAX application to:** 217-793-9454



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**MINISTRY OUTREACH GRANT PROGRAM**  
**PROJECT UPDATE FORM - TWO-YEAR PROJECTS**

**For two-year projects, this form is to be completed at the end of the first year following approval of a grant and returned to the CEF Office.** Please complete the following items, providing any additional information you feel may be of interest to the CEF Board of Trustees.

Please return this completed form to: CID Church Extension Fund  
Ministry Outreach Grant Program  
1850 N. Grand Ave West  
Springfield, IL 62702-1626  
Email: [cef@cidlcms.org](mailto:cef@cidlcms.org)

1. Name of Sponsoring Organization: \_\_\_\_\_
2. Name of Project: \_\_\_\_\_
3. Contact Person: \_\_\_\_\_
4. Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_
5. Amount of Grant received: \_\_\_\_\_
6. Amount of Grant spent (Attach receipts\*): \_\_\_\_\_
7. Additional amount spent by congregation or school on this project: \_\_\_\_\_
8. Status of Project: \_\_\_\_\_
9. How was the CEF acknowledged or publicized? \_\_\_\_\_  
\_\_\_\_\_
10. Please summarize the results of the project to date. Are the objectives being met? (Use additional pages if needed). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of person submitting report (*please print*): \_\_\_\_\_

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

*\* Receipts should be attached for specific purchases related to the project. Amount spent should reflect all expenditures.*



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**MINISTRY OUTREACH GRANT PROGRAM**  
**PROJECT COMPLETION FORM**

**This form is to be completed and returned to the CEF Office upon completion of your project.**  
Complete the following items, providing any additional information you feel may be of interest to the CEF Board of Trustees.

Please return this completed form to: CID Church Extension Fund  
Ministry Outreach Grant Program  
1850 N. Grand Ave West  
Springfield, IL 62702-1626  
Email: [cef@cidlcms.org](mailto:cef@cidlcms.org)

1. Name of Sponsoring Organization: \_\_\_\_\_
2. Name of Project: \_\_\_\_\_
3. Contact Person: \_\_\_\_\_
4. Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_
5. Amount of Grant received: \_\_\_\_\_
6. Amount of Grant spent (Attach receipts\*): \_\_\_\_\_
7. Additional amount spent by congregation or school on this project: \_\_\_\_\_
8. Date project was completed: \_\_\_\_\_
9. How was CEF acknowledged or publicized? \_\_\_\_\_  
\_\_\_\_\_
10. Please summarize the results or outcome of the project. How were the objectives met? (Use additional pages if needed). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of person submitting report (*please print*): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_\*

*Receipts should be attached for specific purchases related to the project. Amount spent should reflect all expenditures.*