

Mission Funding Request
Western North Carolina Baptist Fellowship

Date Application Submitted:

WNCBF Member Church submitting application:

Name of individual who prepared application:

Telephone number or E-Mail Address:

Agency or Beneficiary of Request (Applicant):

Amount of funds being requested from WNCBF:

Funding anticipated from other sources:

Total cost of Mission Project or Undertaking:

Date project to begin:

Date project to be completed:

Location where project will be carried out:

Specific use of funds being requested from WNCBF:

Provide a general description of the project for which the funds will be used which includes the issue being addressed and the desired outcome following the completion of the project:

Information to be submitted with the application by the Church, Agency, or Non-Profit Organization that will be managing the project or undertaking (these can be emailed to the WNCBF at wncbfnews@gmail.com or mailed to address below):

- Copy of the budget showing the total cost of the project undertaking
- Copy of the most recent financial statement if applicant is a non-profit organization
- Copy of the most recent annual report of activities if applicant is a non-profit organization
- Copy of recent annual operating budget if applicant is a non-profit organization

Request Submitted By: _____ Representing: _____

Mission Team Action Taken: Approved: _____ \$ _____, Denied: _____

By: _____ (Mission Team Rep.) Date: _____