

## UMVIM Grant Application Fund 9936

Creating relationships that are empowering not doing for.

UMVIM Trained Team Leader \_\_\_\_\_

Contact Information \_\_\_\_\_

Date of UMVIM Training \_\_\_\_\_ (3 hours refresher course possible contact [kdickriede@gmail.com](mailto:kdickriede@gmail.com))

UMVIM Project Name \_\_\_\_\_

Local (host country) UMC/Methodist Partners \_\_\_\_\_

Name of Bishop or District Superintendent you are in relationship with: \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

General Advances or Conference Advance that you partner with \_\_\_\_\_

Background about the relationships and the project in host country \_\_\_\_\_

\_\_\_\_\_

How are you a part of 50/50 Partnership? If you aren't already doing this, are you willing to learn more about this mission vision?

\_\_\_\_\_

\_\_\_\_\_

List of East Ohio partner churches or other community partners investing in this ministry \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous funding report. (Receipts from past projects, host country person contacts, photos, etc.)

How were lives changed by past UMVIM Journeys, both East Ohio people and in country people. Tell us a story to use in e-news and websites, and Facebook pages.

Budget of funding request, request, cost, use, purpose. (please attach additional information)

Amount being request \_\_\_\_\_ Purpose of request \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_