

Application for designation or renewal as an
ADVANCE SPECIAL
by The East Ohio Conference of
The United Methodist Church



East Ohio Conference
The United Methodist Church

Advance Special designation allows recipients to identify and promote their specified missional project to UMC churches in the conference. The goal is to encourage and attract wider recognition and support, both financially and in recruitment of volunteers. Designation creates a fund number for donor directed giving through the Conference Treasurer. If approved, you must complete an annual check-in form. The full application must be completed every four years. **Please note that this is not an application for guaranteed funding from the conference. Current Advances and guidelines are listed here: <https://www.eocumc.com/finance/advance-special.html>. Due by January 15.**

- ☐ This is a RENEWAL request for Fund Number _____
- ☐ This is a NEW request. *If approved, an Advance fund number will be created.*

Contact Information, for EOCUMC use only (type or print clearly)

Organization Name (checks payable to):		
Describe the mission or ministry in three or four sentences. This is what will be shared online and in print materials:		
Street Address:		
City:	State:	Zip:
Email:	Phone:	
Person applying:	Title/Role:	
Project Location (primary city and/or other areas served):		
Director/CEO Name:	Email:	
Dir/CEO is (check all that apply): ☐ Paid ☐ Volunteer ☐ Full-Time ☐ Part-Time		
Treasurer Name:	Email:	
Non-Profit Status: ☐ Form 990 Tax Exempt ☐ UMC Local Church ☐ other (please explain below)		
Web/Social Media URL:		

Instructions: Please answer ALL questions and include the supporting documents listed on page 4. Incomplete applications will not be reviewed. Questions can be directed to Connectional Ministries connectionalministries@eocumc.com or (330) 499-3972 ext. 102.

MISSION/MINISTRY DETAILS

1. Please describe the population this project serves (for example-economic, generational, ethnic, cultural, or other groups).

2. Please explain:

- specific ways that this mission project develops relationships with the people you serve
- the mission impact in the community served
- how the mission is transformational, not just transactional

3. On average, how many individuals receive services from this mission project? (use one)

Weekly _____

Monthly _____

Annually _____

4. If other ministries or community initiatives in your area serve an overlapping population, how does this mission project differ and how do you partner with them?

5. The mission of The United Methodist Church is to make disciples of Jesus Christ for the transformation of the world. How is your agency/ministry making disciples of Jesus Christ for the transformation of the world?

6. What year did this mission project start? _____

Has the focus changed in recent years? If so, how?

7. List or attach names of Board members or governing committee members. Group by/indicate denomination, community, or other organizations they relate to.

8. Does your organization have a child protection policy? ☐ YES ☐ NO

If yes, please attach a copy.

9. List ALL United Methodist congregations with which your ministry is partnering, as well as other faith communities or community agencies.

10. If you receive donations from this Advance in the coming year, how will they be used?

11. What are specific ways people can partner and volunteer with this mission?

12. What has been challenging or changed related to your funding sources, volunteers, and/or partnerships that might affect your ability to operate this ministry in the coming year?

THE FOLLOWING MUST BE ATTACHED FOR YOUR APPLICATION TO BE CONSIDERED:

1. A letter/email of support from the District Superintendent or the Connectional Ministries director who relates to this Advance.
2. A budget narrative indicating all major sources and amounts of revenue and a summary of expenditures during the most recent fiscal year, not just funds received through the Advance. Please limit this summary to 1-2 pages.
3. A one-page statement of audit indicating when and by whom an audit has been completed. Summary only, please do not submit the full, detailed audit report. The local church audit form may be used by smaller organizations, but please follow the guidelines. See <https://www.eocumc.com/online-forms/index.html> for details.
4. A budget for the current year and for the following year, if available.
5. A recent newsletter or letter to donors from your agency.

Please Note: *The director or person applying may be asked by the Board of Missions to share a testimony about this ministry with the Conference.*

Signature <i>(should match name applying on first page)</i>	Title	Date
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Application and supporting documents are **due by January 15**. It may be scanned and emailed to connectionalministries@eocumc.com or mailed to the address below.

East Ohio Conference UMC Attn: M. Thomas
PO Box 2800
North Canton, OH 44720