

**Emergency Welfare**

**Fund**

**Application for grant support from Lincolnshire Methodist District**

**Applicant Details:**

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| --- | --- |
| **Church or Project Name:** | **Circuit:** |
| **Correspondent Name:** | **Position held:** |
| **Address:** |
| **Tel. No.** | **Email:** |

**Details of the need:**

*Please answer the following questions. The spaces given can be expanded as appropriate.*

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| --- | --- |
| **Project Title (where applicable):** | **Amount of grant requested:** £ |
| **What need in your community are you trying to meet?** |
| **How do you intend to spend a grant from this fund?** |
| **Are there any other funds you have already drawn upon or could draw upon?****Please give details of current balances of relevant benevolent funds.** |
| **Is there any other information that is relevant to this application not covered above?** |

**Bank Details**

Grants are paid by BACS – please give details of the account into which any approved grant should be paid. Grants will only be paid into Methodist bank accounts.

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| Account Name: |
| Account Number: | Sort Code: |
| Name of Bank: |  |

**Authorisation**

Signed: …………………………………………………………….. Minister with pastoral charge/Leader

Date: ……………………………………..

*If this application is from an ecumenical group please show that it is supported by the Methodist Circuit.*

I confirm that the application has the support of the Methodist Church

Signed ………………………………… Minister in pastoral charge or Superintendent

Date

**Submission of Application**

When completed please send this form to the District Officer at PA@lincolnshiremethodist.org.uk

If you need help with emailing or scanning a paper form prior to emailing then please contact your circuit office for help with this.

**For District Council use only:**

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| Names of three trustees giving approval to this application: |
| 1. | 2. | 3. |
| Notes back to church/circuit |