



## 2017 WARE PRAYER AND SPIRITUAL FORMATION GRANT APPLICATION

**Name of the Church / Group applying:**

**Date:**

**Amount Requested:**

Person Responsible for this Ministry:

Position – Title – Responsibilities:

Address:

E-Mail address:

Telephone #:

1. How does this ministry nurture/develop Spiritual Formation?
  
  
  
  
  
  
  
  
  
  
2. How was the need for the proposed ministry determined?
  
  
  
  
  
  
  
  
  
  
3. Attach a detailed budget, including income from planned activities and/or events and outside sources as well as expenses related to the ministry, including meetings.  
Include the following information:
  - a) Total budget
    - a. How much is requested from the Spiritual Formation Grant?
    - b. How much is requested from other sources? Please include name of other sources?
  - b) Funding deadline
  
  
  
  
  
  
  
  
  
  
4. How will the ministry be sustained once grant funds are spent?

(Signature of person responsible for ministry):

Date:

Please make Grant check payable to:

Church or Ministry

Mail scholarship check to:

Please return completed application to the Florida United Methodist Conference, Laurie Hofts  
[lhofts@flumc.org](mailto:lhofts@flumc.org) or 450 Martin Luther King, Jr. Ave., Lakeland, FL 33815