



**CHURCH EXTENSION AND CAPITAL FUND
APPLICATION FOR CHURCH EXTENSION FUNDS**

Manitoba/Northwestern Ontario Synod
of the Evangelical Lutheran Church in Canada

Application to be submitted to:

Committee for Mission of the
Manitoba Northwestern Ontario Synod
201 – 3657 Roblin Blvd.
Winnipeg MB R3R 0E2

1. Submitted by: _____

2. Project Title: _____

3. Description of Project: (please use extra pages as needed)

4. Rationale for Project:

5. Project criteria addressed:

6. Objectives of Project:

7. Target audience of project:

8. Administrative relationships:

a) Who is responsible to administer the project and complete reporting requirements? Provide name, address, phone number, fax and email.

b) Who will be involved in carrying out the project? (ie individuals, congregations, synod, committees, etc.)

12. Project application date: _____

13. Signature of applicant: _____

Submitted by: (please print)

Signature

Project applications must be submitted to the attention of the Committee for Mission for the Manitoba/Northwestern Ontario Synod by the date the synod has established to review such applications. For information on the dates established by the Committee for Mission please contact the MNO Synod Office directly at (204) 889-3760 or mnosynod@elcic.ca.

For Manitoba/Northwestern Ontario Synod use

Application received by: _____ Date: _____

Reviewed by Committee for Mission (date): _____

Amount approved: \$ _____ Date approved: _____

Funds forwarded: \$ _____ Date forwarded: _____

Evaluation received (date): _____

Evaluation forwarded to the Advisory Board (date): _____