Together Emphasizing Alaska's Mission (TEAM) Large TEAM Grant Application – For projects \$3,000 or more Alaska Synod

Name of Project
Email Address of Project
Address of Project
Name and Title of Project Coordinator
Email Address of Project Coordinator
Phone Number of Project Coordinator
Address of Project Coordinator
How will the project emphasize growth and development of ministry?
Which Alaska Synod goal does this project address?
How does the project address this goal?
Please list documents from your congregation (or group of congregations) and community that demonstrate support for your project. [Copies of these supporting documents must be submitted with the application.]

Describe the need for this project.
Describe project plans, including timeline, strategies and logistics.
Provide the names and contact details of at least three people who will work on this project.
Why do you need help from the Alaska Synod through TEAM?
What resources are required from the project?
What resources are required from TEAM?
What resources are required from other entities?
List things that will occur if your project is successful. Also, put each of these things in measurable terms.

Proposed Budget

Expense Item	Your Funds	TEAM Funds	Other Funds	<u>TOTAL</u>
TOTAL				

Expense Items can include Staff, Travel, Materials, Postage, Equipment and Supplies. [Copies of minutes to show the above budget has been approved by the congregation must be submitted with this application.]

If this project is funded, I agree to assume the following responsibilities:

- Establish a separate account for TEAM funds and identify three signers, two of whom must sign each check:
- Provide a written report and an oral report to the Synod Assembly at the first Assembly after receipt of funds;
- Provide written progress reports to the Synod Council for the October Council meetings, during the period of the grant;
- Provide a final written report to the Synod Council prior to the February Council meeting, following the period of the grant; and,
- Return any unused funds at the completion of your project to TEAM c/o the Synod office.

Name of the Project Coordinator

Signature of Project Coordinator