

# Black Leadership Projects Grant Application

## APPLICATION INSTRUCTIONS

Please complete this form in full (**attaching additional pages or documents if necessary**) and return no later than **May 31st** to

**ATTN: Marissa Ivey Chiles**  
**Black Leadership Projects Grant**  
**Disciples Home Missions**  
**P.O. Box 1986**  
**Indianapolis, IN 46206-1986**

Applications will also be accepted electronically by **Marissa Ivey Chiles** at [mivey@dhm.disciples.org](mailto:mivey@dhm.disciples.org)  
For questions, you may contact Rev. Sheila Spencer at [spencer@dhm.disciples.org](mailto:spencer@dhm.disciples.org)

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## AMOUNT OF GRANT

All requests will be considered up to \$5,000. There is no minimum request.

**AMOUNT REQUESTED:** \$ \_\_\_\_\_

**PROJECT CATEGORY (Projects must *clearly* relate to one or more project category. Please check all that apply. See the guidelines on page 1 for detailed category descriptions.)**

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|---|--|
| <input type="checkbox"/> Leadership in Congregational Life          | <input type="checkbox"/> Scholarship Support for Leaders |
| <input type="checkbox"/> Leadership in Outreach Ministries          | <input type="checkbox"/> Faith Development of Leaders    |
| <input type="checkbox"/> Leadership in African American Programming |  |

## **1. IDENTIFYING INFORMATION**

Name of Project: \_\_\_\_\_

Contact Person (Name, Title, Phone and Email) \_\_\_\_\_

Name of church or organization (if proposal is for an individual's project/scholarship, please mark N/A)

Address of Organization or Individual (Street, City, State, Zip) \_\_\_\_\_

Date funds are needed \_\_\_\_\_

Date of event (if applicable) \_\_\_\_\_

Have you as an individual, organization, or church applied for BLGP funds before? \_\_\_\_\_

If so, was your request granted? \_\_\_\_\_

**2. PURPOSE OF PROJECT** (Why do you see a need for the creation of this project? What result do you expect if your project is successful? What is your overall goal?)

**3. TARGET AUDIENCE** (What is the primary population or group you hope to reach?)

**4. LEADERSHIP** (How will your project promote the development of African American leadership?)

**5. PROCEDURE FOR IMPLEMENTING PROJECT** (How, specifically, will you implement your project in order to meet your stated purpose/goal? Describe the steps and actions needed, including a timeline.)

**6. STAFF PERSON RESPONSIBLE** (Each grant recipient must choose a Disciples Home Missions staff member to serve as a sponsor and **contact that sponsor prior to applying: Rev. Dr. R. Wayne Calhoun, Sr.**, Director of Congregational Transformation and Evangelism ([rcalhoun@dhm.disciples.org](mailto:rcalhoun@dhm.disciples.org)), **Rev. Sheila Spencer**, Interim President of DHM - ([sspencer@dhm.disciples.org](mailto:sspencer@dhm.disciples.org)), or **Rev. Yvonne Gilmore**, Interim Administrative Secretary of the National Convocation ([ygilmore@disciples.org](mailto:ygilmore@disciples.org)).

**Please contact Rev. Sheila Spencer if you have questions about choosing a sponsor.**

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**7. BUDGET** (As an attachment to your application, please include an itemized budget with the total proposed cost of your program/project, the amount of funding requested, any additional sources of funding available, and itemized list of how funds will be used [e.g., equipment and supplies, resources, scholarships, education, honorariums, etc.] *Applications will not be considered without an itemized budget.*)

**8. IF YOUR GRANT IS APPROVED:** If awarded, **two reports to the committee are required:** One at six months from the award date and a second after one year (or at the conclusion of the project) To be in good standing for future awards, previous grant recipients must be current in submitting their reports.

**Please indicate to whom (or to what organization) your award check should be made payable:**

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