

**CENTRAL STATES SYNOD MISSION ENDOWMENT FUND**  
**GRANT POLICIES, PROCEDURES, AND FORMS**  
Approved by the Executive Committee 1.19.18

**PURPOSE**

The purpose of this document is to provide a process for distribution of the earnings of funds managed by the Central States Synod (CSS) Mission Endowment Fund (MEF) Committee. Because individual funds under the umbrella of the MEF have designated and/or restricted purposes for which earnings can be expended, it is necessary for the MEF Committee to have a process and procedure for awarding distributions from each individual fund. This document will require updating whenever a new fund is established under the MEF umbrella.

**GRANT REQUEST FORMS**

For specific MEF Grant Request Forms refer to the following attachments:

***Form 1: LEADERSHIP GRANT REQUEST FORM - SEMINARY DEBT RETIREMENT FOR FIRST CALL AND NEW TO THE SYNOD ROSTERED MINISTERS FOR THE FIRST FIVE YEARS OF MINISTRY IN THE SYNOD***

The current practice, depending on the availability of funds, is to give a grant in the amount of 5% of the remaining principal. Rosters Ministers may apply each year for the first five years of their ministry in the synod, up to a total amount of \$10,000.

***Form 2: LEADERSHIP GRANT REQUEST FORM –CONTINUING EDUCATION FOR ROSTERED MINISTERS***

If approved, the grants may be paid directly to the educational institution/event or as a reimbursement following the submission of receipts. Funds must be used within six months of their approval unless otherwise requested. Following the educational event, grant recipients are asked to write a brief description of what they learned and how they will apply it to their ministry setting and send it to the Mission Endowment Committee.

***Form 3: LEADERSHIP GRANT REQUEST FORM –CONTINUING EDUCATION FOR LAY MEMBER OF THE SYNOD***

If approved, the grants may be paid directly to the educational institution/event or as a reimbursement following the submission of receipts. Funds must be used within six months of their approval unless otherwise requested. Following the educational event, grant recipients are asked to write a brief description of what they learned and how they will apply it to their ministry setting and send it to the Mission Endowment Committee.

***Form 4: OTHER GRANT REQUESTS FORM***

In addition to grants requested by the Synod Mission Table to support new ministries in the synod a congregation may request a grant for a variety of purposes to enhance and revitalize their ministries. The awarded funds must be spent within six months. Grant recipients are asked to write a brief summary of the project/ministry for which the funds have been used, including sending pictures for the purpose of sharing the story about the work of the mission endowment fund.

## GUIDELINES FOR MISSION ENDOWMENT FUND GRANTS

<i>Fund Name &amp; Year Established</i>	<i>Stated Purpose of Earnings</i>	Examples of Grants
The Helena Gillberg Estate 1996	“to aid and support Lutheran ministerial students from the state of Kansas”	Seminary Scholarships for students from Kansas
Eugene Hackler Scholarship Fund 1997	“for seminarian scholarships and to assist first call rostered ministers	Seminary Scholarships for students from CSS Seminary Debt Retirement for CSS First Call Pastors (≤ 5 years)
New Mission Congregations 1999	No stated purpose(s) other than indicated by naming of fund	Grants for new ministries as recommended by the Synod Mission Table
Leadership for Mission Endowment 1999	No stated purpose(s) other than indicated by naming of the fund	Seminary Scholarships for students from CSS Seminary Debt Retirement for CSS First Call Pastors (≤ 5 years) Rostered Continuing Education Lay Continuing Education
Abiding Savior Mission Endowment 2009	“shall be used for Mission and Ministry...20% outreach...20% for Missions of the ELCA....20% for capital improvements, debt reduction, or building programs for any congregation; 40% for any or all of the above....”	Companion Synod Visits Glocal Gatherings Grant to Hollis Renewal Center for Camp Grant to help create a prayer garden at congregation in MO Grant for Garden City Mission Trip
Changed, Sent, Serve Endowment 2010	“create a means of sustainable support for the four missional directions and ministries”	Supplements any grants authorized under other endowment funds
CSS Fund Appeal Earnings (not an endowment fund) 2010	To distribute Fund Appeal earnings from assets designated to seminary student grants, seminary debt retirement assistance grants, continuing education grants	Supplements any leadership grants authorized under other endowment funds
Central States Synod Legacy Fund 2017 (begun with a bequest from William Betker)	The purpose of the fund is for: <ul style="list-style-type: none"> <li>• Ministry with and for youth &amp; young adults</li> <li>• Leadership Development</li> <li>• “New Look” Ministries</li> <li>• Uplifting current ministries</li> </ul>	Campus Ministry, youth mission trips, continuing education for rostered and lay members, new ministries and grants for renewal in congregations

**LEADERSHIP GRANT REQUEST FORM**  
**SEMINARY DEBT RETIREMENT FOR FIRST CALL & NEW TO THE SYNOD ROSTERED**  
**MINISTERS**

\* Anyone in their First Call or new to the synod (up to 5 years) of rostered ministry (a cumulative cap of \$10,00 per individual for debt reduction, dependent on availability of funds)

Requests received by 1 September will be considered at the Fall meeting of the Mission Endowment Fund Committee.

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

1) I am: \_\_\_\_\_ Pastor \_\_\_\_\_ Deacon

2) Years of continuous service under call in this Synod \_\_\_\_\_

3) Current unpaid principal of debt incurred for seminary education \$ \_\_\_\_\_

4) Current monthly payment amounts \$ \_\_\_\_\_

5) I have attached the most recent statement(s) showing the unpaid principal amount(s) \_\_\_\_\_ Yes \_\_\_\_\_ No

6) Attached are copies of documents showing monthly payment amounts from my lender(s) \_\_\_\_\_ Yes \_\_\_\_\_ No

5) Lender contact information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7) I have completed and attached an IRS W-9 Form (<http://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103>)

I hereby certify that the above is true and accurate statement of the information required for this request.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail to:  
Mission Endowment Fund CSS  
420 W 14<sup>th</sup> St. Ste. 101  
Kansas City, MO 64105

E-Mail to:  
assembly@css-elca.org

**LEADERSHIP GRANT REQUEST FORM  
CONTINUING EDUCATION FOR ROSTERED POSITIONS**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

1) I am: \_\_\_\_\_ Pastor \_\_\_\_\_ Deacon

2) Grant Request for: \_\_\_\_\_ Continuing Education \_\_\_\_\_ Extended Study (sabbatical)

Describe below the course(s) of study this grant would support – include date(s), place, course content:  
(continue on back if more space is needed)

I expect this study will help me in leading the congregation (agency, ministry) to:  
(continue on back if more space is needed)

Total cost of study: \$ \_\_\_\_\_

(attach budget details: tuition/travel/lodging/meals, etc.)

Congregation/Agency will contribute: \$ \_\_\_\_\_

I will contribute: \$ \_\_\_\_\_

Grant request: \$ \_\_\_\_\_

I hereby certify that the above is true and accurate statement of the information required for this request. I agree, that following the education event, I will write a brief description of what I learned and how I will apply it to my ministry setting and submit it to the endowment committee. Grants will be paid directly to the educational institution for registration or reimbursement following receipt and must be used within six months unless otherwise requested.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail to:  
Mission Endowment Fund CSS  
420 W 14<sup>th</sup> St. Ste. 101  
Kansas City, MO 64105  
E-Mail to:  
assembly@css-elca.org

**LEADERSHIP GRANT REQUEST FORM  
CONTINUING EDUCATION FOR LAY MEMBER OF THE SYNOD**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

1) I am: \_\_\_\_\_ Parish Ministry Associate (PMA) \_\_\_\_\_ PMA Candidate  
\_\_\_\_\_ Volunteer in my Congregation \_\_\_\_\_ Professional Church Worker

1) Describe below the course(s) of study this grant would support – include date(s), place, course content:  
(continue on back if more space is needed)

2) I expect this study will help me in leading the congregation (agency, ministry) to:  
(continue on back if more space is needed)

Total cost of study: \$ \_\_\_\_\_

(attach budget details: tuition/travel/lodging/meals, etc.)

Congregation/Agency will contribute: \$ \_\_\_\_\_

I will contribute: \$ \_\_\_\_\_

Grant request: \$ \_\_\_\_\_

I hereby certify that the above is true and accurate statement of the information required for this request. I agree, that following the education event, I will write a brief description of what I learned and how I will apply it to my ministry setting and submit it to the endowment committee. Grants will be paid directly to the educational institution for registration or reimbursement following receipt and must be used within six months unless otherwise requested.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Lay Member

Signature \_\_\_\_\_ Date \_\_\_\_\_

Congregation Pastor/SAM

Mail to:

Mission Endowment Fund CSS  
420 W 14<sup>th</sup> St. Ste. 101  
Kansas City, MO 64105

E-Mail to:

assembly@css-elca.org

**OTHER GRANTS REQUEST FORM**

*(This form does not need to be used to request funding. However, minimally the information requested on this form should be included in the request.)*

- 1. Date submitted:**
- 2. Outreach Project/Ministry Name:**
- 3. Request submitted by:** (include contact information)
- 4. Description**
  - a. Purpose or objective of project/ministry :**
  - b. Background:**  
*(Briefly provide information considered in developing the program request. The background may include the people to be served, resources already available, and any other information that would help others understand the discernment process that led to this request.)*
  - c. Planned actions and time line to achieve purpose or objectives:**
  - d. Person/position responsible for oversight of project/ministry:**  
*(It is expected that this person will ensure that updates are provide to the Mission Endowment Committee)*
  - e. Missional partners (people or organization for this project/ministry):**  
*(These may be people who are active participants in the project/ministry to provide support or guidance, or who are aware and prayerfully supportive. These may be people that you have already contacted or who you will contact. It is not necessary to list all individuals, but please provide sufficient information that the breadth of any partnerships is indicated.)*
- 5. Funding**
  - a. Provide break down of funding requested:**
  - b. Detailed budget and specific use of funds requested**
- 6. Further information which may help with the consideration of this request.**

I hereby certify that the above is true and accurate statement of the information required for this request. I agree that I will write a brief summary of the ministry for which these funds were used and submit it, along with pictures to the Endowment Committee, for the purpose of sharing the story about the work of the mission endowment committee.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail to:  
Mission Endowment Fund CSS  
420 W 14<sup>th</sup> St. Ste. 101  
Kansas City, MO 64105  
E-Mail to:  
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