**Scrivens Baillie Fund Application (The W.H. “Bill” Scrivens *Memorial Fund for Youth Ministry &* The James Elwood Baillie *Helping Others Fund)***

|  |  |
| --- | --- |
| **Name:** |  |
| **Phone Number:** |  |
| **Mailing Address:** |  |
| **Email:** |  |
| **Church Name and Minister’s Contact info:** |  |

|  |  |  |
| --- | --- | --- |
| **FUNDING GUIDELINES – The Scrivens Baillie Fund will support up to 1/3 to ½ of the total Event/Activity costs per person, up to a maximum of the following amounts.** |  |  |
| **Event and Activities Length** | **Youth** | **Leader** |
| 3 days or less duration | $250 per person | $125 per person |
| 4 days or greater duration *within* Canada and the U.S | $350 per person | $175 per person |
| 4 days or greater duration *outside* of Canada and the U.S | $400 per person | $200 per person |

|  |  |  |  |
| --- | --- | --- | --- |
| **AMOUNT REQUESTED:** |  |  |  |
| **Event and Activities Length** | **# of Youth x $** | **# of Leaders x $** | **Total Amount Requested** |
|  |  |  |  |

|  |  |
| --- | --- |
| **THE REQUEST IS FOR: (CHECK ONE)** |  |
| **An Individual Youth or Young Adult** |  |
| **A Youth Group** |  |
| **A Youth Leader** |  |
| **A Group of Youth Leaders** |  |
| **An Individual Congregation/Community of Faith:** |  |
| **A Group of Congregations/Communities of Faith:** |  |

|  |  |
| --- | --- |
| **FUNDING PURPOSE: (CHECK ONE)** |  |
| **UCC Course(s)** |  |
| **UCC Camp** |  |
| **Program supporting spiritual growth and Christian education** |  |
| **National UCC Youth and Young Adult Event (Rendez Vous Youth at GC etc.)** |  |
| **Development of Christian leadership skills** |  |
| **New initiative(s) and program(s) support** |  |
| **Benevolence**  *Please note the terms of this bequest prohibit the establishment of an application process by those receiving funds, distribution of the benevolent funds will be considered upon receiving a recommendation from Congregations, Ministry Personnel, Outreach Ministry or Regional Committee on behalf of individuals. Please note individuals may not apply directly to the fund. If you are applying to the fund with a benevolence request, you are not required to fill in any further information.* |  |

|  |
| --- |
| **How will young people / youth leaders benefit from the event/program/activity?** |

|  |
| --- |
| **Please provide a description of the follow-up or evaluation process of the program/event/activities.** |

|  |
| --- |
| **If the grant is being used to support a program/event/activity, please include a budget (along with all revenues and costs associated)** |

**Submit application** **to:** dducette@united-church.ca

**Attention:** *SCRIVENS BAILLIE FUND APPLICATION*