



Eliza Broadus Offering Special Ministry Grant Request Form

Philosophy Statement

The Eliza Broadus Offering Philosophy Statement shall be followed in all situations involving the Eliza Broadus Offering Funds.

Funds from the offering will be used for ministry/evangelism in Kentucky with persons beyond the in-fellowship work of local churches (specifically with those who are not currently members of any church) or for ministries/events which will provide training or support for ministry/evangelism in Kentucky with persons beyond the in-fellowship work of local churches.

Adopted April 2013 by Kentucky WMU Executive Board

Application Instructions and Dates

1. This grant request is for Special Ministries that are affiliated with at least one of the following: (1) Kentucky Baptist Convention (KBC), (2) local Baptist Association/Network affiliated with the KBC, or (3) sponsored by a KBC affiliated church.
2. The grant application process opens September 1 and concludes December 15. **This application must be completed and postmarked by December 15.** Late applications are disqualified.
3. We require the use of the most current revised version of the EBO application form and report.
4. The Kentucky WMU Executive Board Finance Committee meets at the beginning of the calendar year to review and approve the 2024 EBO funding requests during their Executive Board Winter Session and will issue awards by April.
5. **Returning applicants must complete an accountability report** for consideration for subsequent Special Ministry EBO grants.
6. **Priority will be given to funding requests for ministry expenses** such as literature, Bibles, tracts, and other supplies for ministry/evangelism beyond the in-fellowship work of local churches. *EBO Grants can not be applied to salaries, regular bills, or building expenses including maintenance.*
7. **Priority will be given to Special Ministries whose sponsor church is affiliated with the Kentucky Baptist Convention AND gives to both the Eliza Broadus Offering and Cooperative Program.** Check with the sponsoring church's financial secretary to include giving information.
8. **Each applicant is responsible for securing an endorsement statement and signature** from the AMS/NMS, Moderator, or Associational WMU Director from your local association/network area.
9. When filling this application, please include a detailed description of how the money will be used for your special ministry/project/event. Avoid vague language.
10. Grant acceptance denotes your commitment to:
 - **Familiarize** yourself with the work of Kentucky Woman's Missionary Union and the Eliza Broadus Offering.

- **Promote and speak** on behalf of the Eliza Broadus Offering for Kentucky Missions® at churches and associational meetings throughout the year including your local congregation.
- **Include** EBO logo on all printed, website, and promotional material, and the following statement: **Made possible by your gifts to the Eliza Broadus Offering® for State Missions**

If you have any additional questions, please do not hesitate to contact the Kentucky WMU office for clarification.

Kentucky WMU

Phone: 502.489.3534

Email: denise.gardner@kybaptist.org

Subject: EBO Special Ministries Allocation Clarification



Eliza Broadus Offering Special Ministry Grant Request

For Office Use Only

Date received _____

Date emailed _____

Please respond to each of the following

Kentucky Baptist Affiliation

Name of Kentucky Baptist Association in which this ministry is located: _____

Name of person submitting this application: _____

(Person submitting application must be a member of the sponsoring Kentucky Baptist Convention Church)

The ministry must be affiliated with at least one of the following: Please check appropriate box(es)/explain affiliation.

Kentucky Baptist Convention: _____

KBC Affiliated Baptist Association/Network: _____

KBC Affiliated Sponsor Church: _____

Ministries that are not affiliated to one of the above are not eligible for consideration.

Sponsor Church: _____ Association/Network: _____

Does your church contribute to the Cooperative Program through the KBC? Yes No

Does your church contribute to the Eliza Broadus Offering? Yes No

Amount given by your church to EBO last year: \$ _____

Priority is given to ministries who sponsoring church gives both to Cooperative Program and the Eliza Broadus Offering.

Ministry Information

Contact Information for the Ministry

Name of Organization: _____

Name of Person responsible for ministry supervision: _____

Ministry Address: _____

City, State, Zip: _____

Telephone number(s): _____

Email address: _____

Website: _____

EBO GRANT Amount requested: \$ _____

Is this a first-time application? Yes No

If yes, when was the last time you applied? _____

Explanation of EBO Grant usage:

EBO grant check made payable to: _____
(Checks must be made payable to the ministry, church, or association)

Federal Tax Identification Number for this Ministry: _____

Check is to be mailed: Organization address above or

Other - Name: _____

Street Address, City, State, Zip: _____

Special Ministry Purpose and Goals (use additional page if needed)

1. What is your ministry objective?

2. Share about the persons you are reaching and how the EBO grant will help you reach these people for the gospel?

3. Share how this ministry furthers missions/evangelism in your area:

4. Share how many people are impacted by this ministry effort (i.e. How many gospel conversations, salvations, and/or discipling relationships occurred this year).

5. Provide 1 unique story of lives impacted by this ministry.

- When submitting stories, be specific. When including names, provide contact information as we may need to contact the individual to get more information for videos, stories, or highlights.
- Please attach photos in a separate email.

6. I certify that permission is granted to use this story and photographs for social media and promotional purposes for EBO.
Please sign here:

7. Apart from the EBO Grant, how will this ministry be funded and what expenses do you incur annually? (Please include a budget for this ministry and record where your EBO grant was applied; if the association/network is receiving the grant money please include a budget showing the ministry line item. These items are required with the application.)

8. How can churches/WMU groups be engaged in your ministry

9. Please list 3-5 Prayer Requests for Churches/ WMU Groups to pray for your Ministry

10. List FIVE "Because You Give" items that touch the heart. These items should be for the 2023-2024 project, not items from the previous year or requests. These should be in varying denominations, i.e., \$5, \$8, \$15, \$100, (example: \$5 will provide a meal for an inmate's family).

AN ENDORSEMENT STATEMENT AND SIGNATURE IS REQUIRED from either the Association/Network Missions Strategist (or Moderator) OR the Association WMU Director in which the ministry resides. Applicants can not endorse their own application.

Endorsement provided by:

Please check:

- Association/Network Mission Strategist or Moderator
- Association/Network WMU Director

Please indicate why you endorse this ministry. Use an additional sheet if necessary.

Signature: _____ Date: _____

SUBMITTING THIS APPLICATION

Before you submit your application, please make sure you have the following items included with your application.

APPLICANT CHECKLIST:

- Using current REVISED application (must have current year in footer)
- Budget for the ministry
- Budget for the organization which will receive the check (applications without budgets will not be considered)
- Accountability Form (if not a first-time application) or
- First time application
- Financial Giving information for EBO and CP from Sponsor Church
- Endorsement from Association/Network Missions Strategist, Moderator, or Association/Network WMU Director

Submit your form by emailing a completed copy with any applicable materials to denise.gardner@kybaptist.org

If you choose to mail this form, please return this form and applicable materials to:

Kentucky WMU
ATTN: EBO Special Ministries Allocation Request
13420 Eastpoint Centre Drive
Louisville, KY 40223

To confirm receipt of your application, please contact Denise Gardner at 502.489.3427 or email denise.gardner@kybaptist.org.