**Indian Nations Presbytery**

**Technology Fund Grant Application**

Date Prepared: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Members of Project Team:

**Instructions:** In narrative form, please respond to the following. Use additional sheets as necessary.

Describe the project:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A site survey can help you develop and standardize your project. Individuals on the Congregational Support Network (CSN) can work with you, contact the Moderator of the CSN. Please explore your project vision with us and share your responses to the following questions in a separate letter. This is meant to assist our understanding of your environment and to assist your developing a successful outcome.

1. How will completion of this technology project enhance, expand or make more effective the ministry and mission of your church?

2. How are you currently connecting to the internet, is this satisfactory?

3. Are you currently offering online worship or meetings for your congregation? Is this technology satisfactory?

4. Describe your plan for developing/training a team to support, secure, and maintain your technology.

5. Will your church require improvements to support technology improvements?

6. What is the total cost of the project? What amount is/has the church contributing to the project?

7. What is the amount you are requesting?

8. What is the timeline for the project? Start date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Finish date \_\_\_\_\_\_\_\_\_\_\_\_\_

**Please attach any expanded project descriptions, estimates, or proposals on this project with this application.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Send Application to

Indian Nations Presbytery

1001 NW 25th Street, Suite 206

Oklahoma City, OK 73106-5622

E-mail to info@okinp.org

*Applications require council action, so please allow sufficient time to process your request.*

**Session Approval**

*An application from a church must be endorsed by the session.*

At the \_\_\_\_\_\_\_\_\_\_\_ (date) meeting of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the foregoing application was reviewed and approved.

Amount of grant application approved

Signature Date

 Teaching Elder or Clerk of Session

**Congregational Support Network Approval**

The Congregational Support Network has reviewed the Technology Grant Application from

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and approved the request.

(Name of Church)

Signature Date

 Network Moderator

**Indian Nations Presbytery**

Coordinating Council Amount approved

Signature Date

*Pastor/project director, please sign the following agreement:*

**Review Agreement**

If this project is approved, the project team will have six months to one year to complete the proposal at which time the Congregational Support Network will review the progress and the findings to the Coordinating Council.

After three years, the grant recipient will evaluate the effectiveness of the project and report the findings to the Congregational Support Network who will report the findings to the Coordinating Council. A form will be provided for this purpose.

Members of the project team may not benefit financially or materially (beyond reimbursable expenses) from any funds granted to the project. Financial records are subject to audit or review by the presbytery or its agents.

Signature Date

 Teaching Elder or Project Director