



Eliza Broadus Offering Special Ministry Allocation Request

For Office Use Only	
Check #	_____
Date	_____
Amount approved	_____

Applications are received between September 1 and December 15

Before completing this application, please review the instructions* and note the following:

The Eliza Broadus Offering is a state missions offering in support of Kentucky Baptist mission work. The offering is sponsored by Kentucky WMU in partnership with the Kentucky Baptist Convention. Only ministries affiliated with the KBC, a Kentucky Baptist association, or a KBC church may apply. It is an expectation that the home church of those who apply for EBO grants participate in the offering.

*REVISED Instructions are available on line: www.kywmu.org/eboapplication.

Please respond to each of the following:

1. Name of Kentucky Baptist Association where this ministry is located: _____

2. Person responsible for ministry supervision:

Name _____ Title _____

3. Name of person submitting this application if different from above: _____
(Person submitting application must be a member of a Kentucky Baptist Convention church)

4. Contact Information for the Ministry

Name of Organization: _____

Address: _____

City, State, Zip: _____

Telephone number(s): _____

Email address: _____

Website: _____

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

Kentucky Baptist Convention: _____

KBC Affiliated Baptist Association: _____

KBC Affiliated Church: _____

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

6. Type of ministry _____

7. Project is: on-going one-time. Date(s) of one time project: _____

8. Amount requested \$ _____

Please respond to each of the following (use an additional sheet if necessary):

9. If you receive a grant from Eliza Broadus Offering, how do you plan to spend it?

10. How will this grant help you reach people who do not know Christ as Savior and are not currently affiliated with any church? _____

11. Persons to be ministered to: _____

12. Ministry objective(s): _____

13. What are the expenses of this ministry? (Please attach a budget for the ministry AND for the organization which will receive the check)

14. List the funding sources for this ministry.

15. Applicant: Church you attend: _____ Association: _____

Does your church contribute to the Cooperative Program through the KBC? _____

Does your church contribute to the Eliza Broadus Offering? _____

Amount given by your church to EBO last year: _____

16. Please make check payable to: _____

(Checks must be made payable to the ministry, church, or association)

17. Federal Tax Identification Number for this Ministry: _____

18. Mail the EBO grant check to:

___ Organization address

___ Other: _____

19. Did your ministry/organization receive an EBO grant last year? _____

If yes, enclose copy of accountability form.

20. ENDORSEMENT - Application must include an endorsement from either the local Baptist association Director of Missions (or Moderator if there is no DOM) OR the Association WMU Director:

Please check: Endorsement provided by:
___ **Association Director of Missions or Moderator**
___ **Association WMU Director**

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

Signature: _____ Date: _____

APPLICANT CHECKLIST:

___ Budget for the ministry and for the organization which will receive the check

(applications without budgets will not be considered)

___ Accountability Form: ___ Enclosed ___ Sent separately ___ Not applicable (first time application)

Please return this form and applicable materials to:

Eliza Broadus Offering Allocation Request
Kentucky WMU
13420 Eastpoint Centre Drive
Louisville, KY 40223