## DIOCESE OF NEW JERSEY 808 WEST STATE STREET TRENTON, NEW JERSEY 08618

## BOARD OF MISSIONS PART I: ANNUAL REPORT FOR 2015

NAME OF MISSION			
ADDRESS			
PHONE	EMAII	<b>.</b>	
WEBSITE			
NAME OF CLERGY (if applicat	ole)	Part-timo	Supply
If your congregation has no re			
NAME OF WARDEN			
ADDRESS			
PHONE	EMAIL		
NUMBER OF MEMBERS ON M FINANCIAL INFO SHARED AT SUNDAY SERVICE SCHEDULE WEEKDAY SERVICE SCHEDUI WHAT THREE MINISTRIES IN	MEETINGSYE	SNO	
WHAT ADULT FORMATION H LENTEN CLASS, HOUSE CHUF		HE PAST YEAR E.G. BIBI	LE STUDY, BOOK GROUP,

HOW WOULD YOU DESCRIBE YOU	JR MISSION IN YOUR COMMU	JNITY AND BEYOND?
HOW DOES YOUR BUDGET SUPPO	RT YOUR MISSION?	
DESCRIBE YOUR STEWARDSHIP CAM	PAIGN IN THE PREVIOUS YEAR	??
DOES YOUR CONGREGATION PAY TH BUDGET?YESNO	E FULL FAIR SHARE ASKED FOI	R THE SUPPORT OF THE DIOCESAN
IF NOT, HOW MUCH DOES THE CONG	REGATION CONTRIBUTE?	
WHAT PERCENTAGE OF THE FAIR SH	IARE ASKING DOES THIS REPRI	ESENT?%
ARE THERE COMMUNITY GROUPS TH IF YES, PLEASE LIST THE GROUPS HO		
PLEASE LIST THE DIOCESAN EVENTS	S YOU HAVE PARTICIPATED IN	DURING THE LAST YEAR.
HAVE YOU/WILL YOU COMPLETE A P	PARISH AUDIT FOR 2014?	YESNO
DID YOU FILE A PAROCHIAL REPORT	FOR 2014?YESNO	
DURING 2015, HAS YOUR CONGREGA DIOCESE?YESNO	TION RECEIVED A MISSION ASS	SISTANCE GRANT FROM THE
IF YES, HOW MUCH?		
WILL YOU BE APPLYING FOR A MISSI If yes, please complete, Part II of this re		016?YESNO
PERSON COMPLETING THIS FORM: NAME (Please print)	SIGNATURE	DATE

## BOARD OF MISSIONS OF THE DIOCESE OF NEW JERSEY PART II: REQUEST FOR A MISSIONASSISTANCE GRANT FOR 2016 (Please complete this part only if you are applying for a grant for 2016)

NAME OF MISSION					
The following documents must be included with your application. If a document is missing, please include an explanation of why. The information requested is critical in making a decision about your mission assistance grant.					
<ul> <li>2015 budget including last year's actuals</li> <li>Most recent parochial report</li> <li>Most recent annual report to the congregation</li> <li>Audit for 2014</li> </ul>					
					<ul> <li>Financial statement for the first six months of 2015 showing budget and actual figures</li> </ul>
					Number of pledging units and total amount pledged for the past three years
					2015 - # of pledging units Total amount pledged
2014 - # of pledging units Total amount pledged					
2013 - # of pledging units Total amount pledged					
Describe any formal indebtedness to diocese, banks or others e.g. utility companies					
Did your mission receive a grant/loan from Loan & Grant in 2014? Yes No If so, how much?					
Did your mission receive a grant/loan from Loan & Grant in 2015? Yes No If so, how much?					
Have you made the repairs for which the Loan & Grant monies were requested? Yes No					
If you completed the repairs, and have not already, please include copies of the paid bills along with an inventory of the work completed using L&G funds.  If not, what is causing the delay?					
If you received mission assistance for 2015, describe how you used the funding? (attach page if needed)					
If you are requesting mission assistance for 2016, describe how this assistance will equip your congregation for its ministry and mission in your community & beyond? (attach page if needed)					

The Board of Missions and Diocesan Council in order to preserve funding for those mission churches that want to grow, have decided to eliminate in future years, mission assistance grants that are only designed to fund chronic deficits in congregations where there is no local plan to develop and expand ministry, or for stagnant or shrinking congregations unwilling to consider yoked or cluster ministry, or merger. The following criteria are based on their principles for considering requests for mission assistance grants.

Please describe on a separate page which one of the criteria that your mission most closely fits and why.

## 1. Truly missionary work:

- a. Support of new mission churches, in which a plan for development that includes funding land purchase and initial construction of first-phase facilities, should be a top priority.
- b. When a mission congregation presents a well-planned proposal to meet real and urgent human needs, it should be a priority for the whole Diocese to partner with that mission church in that missionary work.
- c. Unique missionary work: Some congregations feel called to make a special effort to attract and minister to a particular constituency. Support from the Board of Missions may be appropriate and desirable.
- **2. Recovery from trauma:** There are times when a thriving congregation suffers a serious set-back due to some form of trauma: natural disaster (fire, flood, structural damage), or leadership factors (misconduct, sudden death, severe conflict). When a well thought-out plan of addressing that trauma in a way that will enable a congregation to recover its previous vitality is presented, the Diocese should support such effort with mission assistance.
- **3. Consolidation:** Many of our mission congregations have inadequate facilities (too small sanctuaries, not enough classrooms or other ministry space, lack of parking), or are located so close to other Episcopal congregations that they cannot reasonably expect adequate growth to enable them to reach financial independence. When a congregation begins to recognize that reality and is willing to consider options toward consolidation (merger, yoking, regional ministry), assistance to help in consolidation should be given.

Factors that would mitigate against continued mission assistance or consideration of a new request are:

- Requests to fund chronic deficits with no plan for addressing it locally.
- Shrinking or stagnant congregation unwilling to consider consolidation.
- Unrealistic, uncertain and/or unsustainable plans for outreach

While it is understood that some missions will always need help because of the communities they serve, this is the exception. If you have received a mission assistance grant for the past five consecutive years, is there a plan for your mission to no longer need a grant? If not, why not? (attach page if needed)				
PERSON COMPLETING THIS FORM:				
NAME (Please print)	SIGNATURE	DATE		
THIS REPORT IS DUE 15 OCTOBER 20	Revised: 6/2015			