



Latinx Leadership Renewal Grants

Church Name: _____

Section One Description of Church:

Where is your church?

How many people attend?

How many paid pastors and staff do you have?

How many unpaid leaders of ministry, worship, and administration?

Denomination/Affiliations:

Are you part of another congregation?

How old is your church?

Primary language spoken:

Please submit evidence of your congregation's 501(c)(3) not-for-profit status.

Please provide the following information about the leaders of your congregation. Leaders include people who are paid and those who are not paid but are responsible for part of the church's life.

1. Pastor's Name

Email

Phone

How long have you been in leadership in the church?

2. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

3. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

4. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

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5. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

6. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

7. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

8. Leader's Name

Email

Phone

Describe your role and how long you have been in leadership in the church:

Name of Primary Contact:

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Section Two - This grant is to be used for renewal, rest, fellowship, and learning together for the leaders of the congregation. Please tell us why a time of renewal, rest, fellowship, or learning is important for you. Be sure to include which leaders will participate.

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What do you want to do with the money to provide rest, renewal, fellowship, or learning?
Please share your specific plans.

(500-word limit):

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Timeline of Actions (limit to visible space):



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Budget Proposal – Categories listed are ones often used. You may have others as well.

Expense Description	Amount
Travel	
Please include location, mileage, or ticket cost for the entire group. What is the Estimate based on?	
Food	
Estimate cost of each meal for each person and include total.	
Lodging	
Specify number of rooms, number of nights, and source of cost estimate.	
Fees	
Ticket or admission prices for any events or places you will attend.	
Books or materials	
Speakers	
Miscellaneous supplies	
Other	
TOTAL EXPENSES	
GRANT REVENUE	(\$3,500)
ADDITIONAL REVENUE	

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Section Four

What do you hope will be different because of this experience?

Response (250-word limit):

**This is the end of the application.
When you are finished, please email this application to
ebw@austinseminary.edu.**