



Knox Presbyterian Church USA
Mission Council Application
For Mission Organizations



Date: _____

Name of Mission Organization: _____

Current Address: _____

Preferred Telephone: _____ Email: _____

Name contact person Mission Organization: _____

Name of Director of Organization: _____

Extension # or phone: _____ Email: _____

What is the name of your website: _____

Is/Are staff member(s) associated with Knox Presbyterian Church? _____ YES _____ NO

If Yes, what is/are his/her/their name(s): _____

Description of Mission Organization:

Attach additional pages if necessary _____

Does your Organization have a Statement of Purpose? If so, please state: _____

Are you a Not-For-Profit Organization? _____ Please attach copy of 501(c)3 status

Sources funding your Organization: _____

Number of people served by your Organization on an annual basis: _____

Percentage of donations used for programs by your Organization: _____

Your annual budget is spent as follows (in percentages): _____

Funding amount requested: _____ Date funds needed: _____

Date received by Mission Council: _____

Approved: Yes / No Date: _____

Application should include:

1. Any literature that your organization deems relevant.
2. Your latest annual report.

Mission Council needs a minimum of 6 weeks for review of the documentation. Please keep this in mind with regard to the date when funds are needed. Applicant's presence at a Knox Mission Council meeting might be requested to address follow up questions.

Mission Council requests that a brief report of the accomplishments/results be submitted after completion of the project. The report can be submitted in writing or electronically. Oral reports at a Mission Council meeting supplement the written report and will be limited to 10 minutes.

Please attach items 1 and 2 to this form and return to:

Suzanne Harris and Kim Williams
Mission Council Elders
Knox Presbyterian Church
1105 Catalpa Lane
Naperville, IL 60540-7905

or email Suzanne at sharris0124@gmail.com