



Building for Mission Grant Initial Interview Request Form

CONGREGATION INFORMATION

Congregation's Name: _____

Address: _____ City: _____

Zip Code: _____ Website: _____

Name of Parish Administrator/Secretary: _____

Office Phone Number: _____ Office Email: _____

Name of Pastor: _____ Email: _____

Pastor's Phone Number: _____

Call Status: Full-time Part-time Term Call Interim Other: _____

Additional Called Pastors/Staff and Call Status:

Grant contact person: _____

Email: _____ Phone Number: _____

- *Email this completed form and supporting documents to grants@mnys.org. (see Process #1)*
- *You will be contacted to schedule the interview.*
- *Interviews will be scheduled allowing the grant review team time to review the received documents.*
- *Topics included in the interview are:*
 - *The congregation's mission plan, goals and outcomes*
 - *Financing*
 - *Timeline*