



LUTHERAN WOMEN *in Mission*
Office of the Vice President of Gospel Outreach
LWML Rocky Mountain District
missions@lwmlrmd.org.

GUIDELINES FOR SUBMITTING MISSION GRANT PROPOSAL

*How then will they call on him in whom they have not believed?
And how are they to believe in him of whom they have never heard?
And how are they to hear without someone preaching?
And how are they to preach unless they are sent?
(Romans 10:14-15a)*

LWML Rocky Mountain District Mission Grants are selected by convention delegates and *paid during the biennium in which they are selected*. Mission grants are paid from mite offerings received during the biennium.

Deadlines are strictly followed. Please pay close attention to all deadline dates.

Grant proposals may be submitted by an LWML Group or individual. Proposals must be for individuals or groups affiliated with LCMS or a *Recognized Service Organization* (RSO).

The grant recipient must be affiliated with one of the following: LWML, LCMS, an LCMS District, or a Recognized Service Organization (RSO) of The Lutheran Church – Missouri Synod.

Please be as specific as possible when indicating the need for funds. Attach additional pages if necessary. Keep in mind that the proposed project must be viable during the biennium in which it is requested. Photographs are welcome, but not required. All application information will be used to choose the grant proposals that will be brought before convention delegates.



MISSION GRANT PROPOSAL APPLICATION

APPLICATION DEADLINE IS November 15, 2023

_____ of _____
(LWML GROUP / INDIVIDUAL) (CONGREGATION / CITY)

is submitting the following project for consideration at the 2024 LWML Rocky Mountain District Convention.

The proposed project is for _____
(ORGANIZATION)

in _____
(CITY / STATE / COUNTRY)

Recipient contact information: _____
(NAME)

(STREET ADDRESS OR P.O. BOX) (CITY / STATE / ZIP CODE)

(PHONE NUMBER) (EMAIL ADDRESS)

The recipient must be affiliated with one of the following. Please check the one that applies to this request.

LWML LCMS District LCMS Recognized Service Organization (RSO) of LCMS

The money is needed for _____
(Be as specific as possible. Attach additional sheet if necessary.)

Amount requested \$ _____ Is the need current? Yes No

When is the money needed? (Keep in mind this proposed project must be viable during the 2024-2026 biennium.)

Has the project had other funding sources? [] Yes [] No (If yes, list other funding sources and amounts.)

How does this project share the Gospel with those who haven't before heard or believed it?

Why do you think this would be a good project for LWML Rocky Mountain District?

This application is submitted by:

Name _____ Address _____

Phone _____ Email _____

**Return to: Andi Noblitt, VP of Gospel Outreach
7254 Eagle Shadow Ave,
Brighton, CO 80602
missions@lwmlrmd.org**

**APPLICATION DEADLINE
NOVEMBER 15, 2023**

Note:

1. If emailing this grant application or if using the electronic online form, you will receive an acknowledgement of receipt of the application. If acknowledgement is not received **within three (3) days**, please contact the VP of Gospel Outreach.
2. If the grant application is mailed through the postal service, you will receive an acknowledgement of receipt. If acknowledgement is not received **within ten (10) days**, please contact the VP of Gospel Outreach.