



Application for Assistance from a Liberty Associational Team

*Based on the criteria for disbursement, please indicate which Associational Team this application is for:

_____ Missions & Evangelism Team

_____ Church Strengthening Team

_____ Leadership Development Team

***Completed applications must be submitted to the Associational Office by mail or by email**

By mail: Liberty Association

By email: domlibertyassoc@gmail.com

Attn: Admin Tm Leader

Subject Line: Admin Tm Leader

PO Box 1881

Glasgow, KY 42141

The process by which approved funding will flow...

1. The request for funding will be submitted to the Administrative Team from a Liberty Baptist Church.
2. The request is submitted for review to the appropriate Associational Team for consideration according to the criteria of that team.
3. Funding for approved requests will be managed and monitored through the Administrative Team.

**THIS PAGE ALONG WITH THE CORRESPONDING TEAM PAGE AND THE COVER PAGE IS WHAT WILL BE
CONSIDERED AS A COMPLETED APPLICATION**

Name of the Liberty Association Church making the request: _____

Name of the person submitting this application: _____

Contact Information

Phone: _(____)_____ Email: _____

Pastor or Church Clerk Signature: _____

Amount request: \$_____

**Please note that if approved (as funds are available) either the full amount or a portion of the request will be granted.*

Does your church contribute financially to the work of the Liberty Association?

Yes _____ No _____

***Checks for approved requests will be issued to the Liberty Association church making the request**

Federal Tax Identification Number for the church: _____

Please mail the check to:

Allocation Request
Missions and Evangelism Team

Instructions for Applicants

The task of the Missions and Evangelism Team is to assist the churches of the Liberty Association of Baptists in fulfilling their mission/vision and/or establishing new works specifically designed to reach people with the gospel of Jesus Christ.

Please note the following guidelines:

1. Requests must meet the criteria of advancing the gospel. Does this request aid in fulfilling the Great Commission and/or fit into an Acts 1:8 strategy?
2. Applications will only be considered at the request of the local church and not individuals seeking assistance. Each individual or ministry (a ministry may include multiple individuals from the requesting Liberty Baptist Association church) must have a written endorsement of a Liberty Baptist church of which they are a member (**It will be assumed that the 'Pastor or Church Clerk Signature' signifies the written endorsement of the church*). One grant per church per year will be considered for funding. If all submitted requests have been considered and/or funded and mission funds remain available, a second request from a previously funded church may be considered.
3. Applications must be accompanied by a ministry budget. Please provide specific information as to the mission or evangelism effort and the approximate expenses associated with the ministry effort.
4. Allocations may only be applied to individuals who are members of a Liberty Baptist church.
5. Funding is designed to assist with the expenses related to missions and evangelism such as literature, Bibles, equipment, supplies, mission trips, and training. Please do not request funds for buildings or salaries. These will not be considered.
6. Accountability of expenditures is anticipated as well as a ministry report related to the missions/ evangelism effort. Please submit the accountability form once the effort is completed.
7. Allocations will be dispersed once the Missions/Evangelism Team has approved the request. Notification of all granted requests will be forwarded to the Administrative Team.
8. Applications must be submitted in a timely manner to allow ample time (preferably at least one month before allocation is needed) for consideration and recommendation on behalf of the Missions/Evangelism Team.

This page is only to be filled out if this application is for the Missions & Evangelism Team

Person(s) responsible for overseeing this ministry/outreach (if different from applicant):

**If this application is for mission trip assistance please also identify the organization coordinating the trip*

Name: _____ Title: _____

Where will the ministry/outreach take place?

Ministry/Outreach Title (if applicable): _____

Ministry/Outreach dates: _____ - _____

Ministry/Outreach is: On-going _____ One-time _____

Please use an additional sheet if needed to respond to each of the following

1. Persons to be ministered to:

2. Ministry objective or focus:

3. List the funding sources for this ministry:

➤ Investment by the church: \$ _____

➤ Personal investment of the individual(s) **If applicable* \$ _____

**Estimated budget for this ministry/outreach: \$ _____

4. If a grant is received, how will it be invested?

Allocation Request
Church Strengthening Team

Instructions for Applicants

The task of the Church Strengthening Team is to assist churches within the Liberty Association by helping to meet specific needs as expressed by the churches. The applicant and team must be able to answer the question: "In what way is this meeting a specific need of a local church, which will result in this church becoming stronger/ healthier?"

Please note the following guidelines:

1. Applications will only be considered at the request of the local church and not individuals seeking assistance. The application must be accompanied by an endorsement of the church (**It will be presumed that the 'Pastor or Church Clerk Signature' signifies the written endorsement of the church*).
2. Allocations may only be applied to churches within the Liberty Association of Baptists.
3. Funding is designed to assist with church strengthening resources, events, pastoral retreats (not seminars...this would fall under the Leadership Development Team), and consultations. Reusable resources will be the possession of the LAB office for the purpose of being loaned out as requested. (If a specific study is requested, the LAB will not order any student/ participant book, but will only order the Leader Kit, or DVD study.)
4. Accountability of expenditures is anticipated as well as a ministry report related to the use of the funds.
5. Allocations will be dispersed once the Church Strengthening Team has approved the request. Notification of all granted requests will be forwarded to the Administrative Team.
6. Applications must be submitted in a timely manner to allow ample time (preferably at least one month in advance) for consideration and recommendation on behalf of the Church Strengthening Team.

This page is only to be filled out if this application is for the Church Strengthening Team

Please identify the area of need (check one):

_____ Church Strengthening Resource

_____ Church Strengthening Event

**either an event your church hosts (i.e. SS Teacher Training) or an off-site event that church representatives are sent to (in which case partial sponsorship may be the need)*

_____ Pastoral Retreat

_____ Assessment/Consultation

Please use an additional sheet if needed to respond to each of the following

Please explain the purpose of the request (be as specific as possible regarding the type of resource, event, retreat, and/or consultation needed):

If the request is approved, how will this result in the church being strengthened?

List the funding sources for this church strengthening need:

➤ Investment by the church: \$ _____

➤ Personal investment of the individual(s) **If applicable* \$ _____

**Estimated budget for this church strengthening need: \$ _____

Date funding is needed: _____

Allocation Request
Leadership Development Team

Instructions for Applicants

The task of the Leadership Development Team is to assist the churches of the Liberty Association in developing and equipping leaders for Kingdom work.

Please note the following guidelines:

1. Applications will only be considered at the request of the local church and not individuals seeking assistance. The application must be accompanied by an endorsement of the church (**It will be presumed that the 'Pastor or Church Clerk Signature' signifies the written endorsement of the church*).
2. Allocations for continued theological education may only be applied to Pastors within the Liberty Association of Baptists.
3. Reusable Pastoral Leadership Development resources will be the possession of the LAB office for the purpose of being loaned out as requested *unless otherwise noted in the application/ approval process*.
4. Accountability of expenditures is anticipated as well as a ministry report related to the use of the funds.
5. Allocations will be disbursed once the Leadership Development Team has approved the request. Notification of all granted requests will be forwarded to the Administrative Team.
6. Applications must be submitted in a timely manner to allow ample time (preferably at least one month in advance) for consideration and recommendation on behalf of the Leadership Development Team.
7. Assistance for Hispanic Leadership Development opportunities will be available to Pastors and members of Hispanic churches within Liberty Association.
8. 'Approved' theological education centers must affirm the Baptist Faith & Message (2000). Such centers include:
 - Seminary Extension
 - Any of the 6 SBC Seminaries
 - Clear Creek Baptist Bible College

This page is only to be filled out if this application is for the Leadership Development Team

Please identify the area of need (check one):

- _____ Pastoral Leadership Development Resource
- _____ Pastoral Leadership Development Event (i.e. seminar, workshop)
**In which case partial sponsorship may be the need*
- _____ Continued Theological Education for Pastoral Ministry
**In which case partial scholarship may be the need*

If a request is being made for assistance in obtaining a pastoral leadership development resource please identify the title, publisher, and author of the resource:

If a request is being made for partial sponsorship related to a pastoral leadership development event please provide relevant information such as event dates, cost, location, event sponsor(s), event title/content, and event website (if applicable):

If a request is being made for assistance with continued theological education please identify the entity providing the continued education and the intended course to be completed:

List the funding sources for this leadership development need:

- Investment by the church: \$ _____
- Personal investment of the individual(s) **If applicable* \$ _____

**Estimated budget for this leadership development need: \$ _____

Date funding is needed: _____

ASSOCIATIONAL ASSISTANCE ACCOUNTABILITY FORM

****To be submitted after disbursed funds have been expended***

Name of Church:

Amount of Funds Received:

A brief account of how funds were spent:

A brief ministry report of what was accomplished (please indicate if it was in the area of missions/evangelism, leadership development, or church strengthening):

Signature: _____

Date: _____

By mail: Liberty Association
Attn: Admin Tm Leader
PO Box 1881, Glasgow, KY 42141

By email: domlibertyassoc@gmail.com
Subject Line: Admin Tm Leader