

# Growing the Body of Christ

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*Siebert Lutheran Foundation*

## Question Group

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**Growing the Body of Christ** by investing in Lutheran leaders, ministries, and evangelism.

### Program Name\*

Please create a simple, understandable name for your program application; we suggest a name that will be clear for our Directors and staff to understand as your program will be labeled as such in our internal system.

*Character Limit: 100*

### Lutheran Organization\*

Is the organization you represent affiliated with the Lutheran Church?

#### Choices

Yes  
No

### Lutheran Denomination\*

Please indicate which Lutheran church body your organization is affiliated with. If you responded No to the previous question, please select "Other" in the drop-down menu.

#### Choices

ELCA  
LCMS  
WELS  
Other

If you selected "Other" for Lutheran denomination, please explain your Lutheran connection.

*Character Limit: 70*

### Organization Background and History\*

Please provide a brief background history of your organization, particularly if you are new to applying to the Siebert Lutheran Foundation; or, if you have worked with the Foundation in the past, please provide any updates since your last application that are relevant to this program and grant application.

*Character Limit: 1500*

### **Dollar Amount Requesting in Application\***

How much would you be requesting from the Siebert Lutheran Foundation in your grant application, should the LOI be approved? Indicate the dollar amount below, using only numeric characters.

*Character Limit: 20*

### **Funding Time Horizon**

Should your program be funded, over what period of time do you wish the funding to apply? We will assume your request is for a 12-month period unless you indicate otherwise in this response.

*Character Limit: 50*

### **Who Will Be Served\***

Please describe the demographics of those who will be reached or served by the program you are requesting funds for, including age, gender, geography, race/ethnicity, and socioeconomic information, as appropriate.

*Character Limit: 3000*

### **Program Description\***

Please provide a concise description of your program, how it will Grow the Body of Christ, what needs in the Lutheran church or congregation it is intended to address, and planned program activities. Please be as specific as possible within the character limit.

*Character Limit: 5000*

### **Implementation Timeline\***

What is the projected timeline for implementation of this program, if your application to the Foundation is approved?

*Character Limit: 1000*

### **Program Budget\***

What is the total annual program budget? Please indicate annual budget below, using only numeric characters.

*Character Limit: 20*

### **Other Funding/Funders\***

Will other sources of revenue (beyond Siebert) be required to support this program? If yes, how will these funds be generated, e.g. service fees, donations, grants, etc.?

*Character Limit: 1000*

### **Organization Profit and Loss\***

- What was your organization's net profit or loss for each of the past three fiscal years?
- If operating at a loss, what sources of funds are being utilized to pay bills?

You may upload any existing documents that illustrate the financial picture of your organization via the browse box below, or you may utilize the character count provided to respond to these questions.

*Character Limit: 500 | File Size Limit: 5 MB*

### **Additional Information**

Is there anything else you would like to tell us about your organization and/or this program? Feel free to use the browse box to upload any additional information, or utilize the character count provided below to add your own verbiage.

*Character Limit: 500 | File Size Limit: 10 MB*