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# **Maintenance of Ministry Fund Criteria**

The Maintenance of Ministry Fund is from the Church of England Clergy Stipend Trust for the assistance of parishes in maintaining the ministry of clergy.

Parishes applying for these grants are still eligible if they have not paid their Share in full.

Who can apply?

Parish Church Councils

What can it be used for?

The office/working expenses of the clergy when it is beyond the means of the parish to provide them.

How to apply?

Complete this form and return it to [finance@manchester.anglican.org](mailto:finance@manchester.anglican.org).



# Maintenance of Ministry Fund Application Form

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| **For Office Use Only (please do not write in this box)**  Grant Number M0M/  Date Application Received Enclosures attached Decision of Grants Panel Approved (amount) £  Date Parish Informed  Rejected (details) |

You and your organisation

|  |  |
| --- | --- |
| a. Name of Church |  |
| b. Address (including town and postcode) |  |
| c. Telephone: | 1. Fax |
| e. Website: | 1. Email: |
| g. Name of contact person |  |
| h. What is your position in the church? |  |
| i. Your address (if different from above) (including town and postcode). |  |
| 1. Telephone: 2. Email: | 1. Fax: |
| m. Title of parish account into which any funding should be paid. |  |

**Name and position of the person whose expenses you wish this grant to go towards (the grants are for Stipendiary clergy only)**

**Reasons for requesting funding:**

3. Costs

Please provide an approximate breakdown of your current expenses:

|  |
| --- |
| **£** |
| **Travelling expenses (public transport, parking)** |  |
| **Hospitality** |  |
| **Telephone/internet** |  |
| **Postage and stationery** |  |
| **Other (please state)** |  |
| **Total** |  |
| **Amount requested from**  **Maintenance of Ministry Fund** |  |
| I am aware that this application does not constitute an offer of a grant *(all grant decisions are made by the full Grants Panel and applicants will be informed of that decision following the meeting)*  **Signed: Date:** | |
| **Signature of Diocesan Representative: Date:** | |

This form should be returned to:

Finance and I.T. Department

Church House, 90 Deansgate, Manchester M3 2GH