



# NORTHFIELD COMMUNITY CHURCH

Office@northfielducc.org

847-446-3070

*“To make God’s kingdom known: here, there and everywhere.”*

## **BOARD OF MISSIONS**

## **Application for the St. Peter Legacy in Mission Fund**

*Please type all answers*

*2020 applications must be received by April 8, 2020*

**Legal Name of Organization:**

**Year Established:**

**Street Address of Organization:**

**City: State: ZIP Code: Website:**

**Telephone: E-Mail: Fax:**

**Executive Director/Chief Executive Officer: Title:**

**Telephone: E-Mail: Fax:**

**Contact Person for this application (if different from name above):**

**same**

**Telephone: E-Mail: Fax:**

**Fiscal Year Start: ( Jan 1 ) End: ( Dec 31 )**

**Total Amount Requested: % for Operating Budget: % for Special Project\*:**

\*If request is for a specific project or purpose, please attach a description, including timetable, identified materials, as well as the identified goal(s) and objective(s).

## **MISSION AND HISTORY**

**Organization’s Mission Statement:**

**A Brief History of the Organization:**

## **SERVICES PROVIDED**

**Briefly describe the program(s) offer by the organization:**

**Identified population or group(s) being served:**

**Number of people served Annually:**

STAFF		Full Time	Part Time
COMPOSITION:	Paid Professionals		
	Support Staff		
	Volunteers		

**DOES YOUR ORGANIZATION HAVE A BENEFIT/FUND RAISING EVENT?** If so, please describe, including when it is scheduled:

**VOLUNTEER OPPORTUNITIES FOR NORTHFIELD COMMUNITY CHURCH: How can volunteers from NCC become involved with the organization?**

FINANCIAL INFORMATION	Last Fiscal Year	Current Fiscal Year Budget
Total Income		
Total Expense		
% for Administrative Expense		
% from Government		
% from United Way		

**IF YOUR ORGANIZATION HAS APPLIED TO NORTHFIELD COMMUNITY CHURCH (NCC) PREVIOUSLY, WHAT NEW CHALLENGES OR CHANGES ARE YOU FACING SINCE YOUR LAST APPLICATION?**

**PLEASE ATTACH THE FOLLOWING DOCUMENTS:**

1. Latest annual report –
2. Current year operating budget -
3. Audited financial statement for last fiscal year -
4. Copy of IRS form 990, if filed –
5. Brief biographical sketch (1 paragraph) of executive director
6. List of sources of funds in excess of \$1,000 for past year
7. Copy of IRS letter granting 501©(3) tax status, if applicable
8. Any additional information and/or press releases you wish to include:

---

Signature of Executive Director/Chief Executive Officer Date

**E-Mail to:** [office@northfielducc.org](mailto:office@northfielducc.org)  
**Or Mail to:** Chair, Board of Missions  
 Northfield Community Church  
 St. Peter Legacy in Mission Fund  
 400 Wagner Rd.  
 Northfield, IL 60093

**For Internal Use Only**  
 Acknowledgement sent:  
 BOM Reviewer: