

United Women in Faith  
Of  
The Mississippi Conference

2025 Arlean Hall  
Mission Grants  
Guidelines and Application



Application Deadline  
April 30, 2025

Only Completed Applications Postmarked  
Or Emailed

By The Due Date Will Be Considered

## **APPLICATION GUIDELINES**

The 2024 Mission Grants are available to any Mississippi United Methodist agency or church to help fulfill its mission. Each applicant must demonstrate a particular project or need for its ministry to be considered for the grant.

### **CRITERIA**

#### **The grant shall be used for mission projects for women, children, youth, and families.**

All recipients must complete and return the Grant Recipient Report by April 30, 2025. Organizations that do not fulfill this requirement will not be considered for future grants. Recipient reports will be mailed to applicants who receive mission grant funding.

**Mail Applications to** Arlean Hall Mission Grants  
c/o Kay B. Barksdale  
1209 Lyncrest Avenue  
Jackson, MS 39202

**Or Email Applications to** [kbbarks10@gmail.com](mailto:kbbarks10@gmail.com) cell phone: 601-955-6623

To ensure receipt of applications send by US Postal Service or email to Kay B. Barksdale @kbbarks10@gmail.com for an acknowledgement or receipt. **DO NOT FAX. Applicants should receive receipt for the application within one week of submission. If receipt is not received, re-send the application with a message that first application was not acknowledged.**

### **AWARDS / RESTRICTIONS:**

Grants range from \$500 to \$2,500 per project and will be awarded by August 20<sup>th</sup> of each year. Grants will be matching grants. Applicants must demonstrate how they will fund the other half or remainder of the project. Funding cannot be used for salaries, stipends, or short term mission trip travel.

**2025 ARLEAN HALL MISSION GRANT APPLICATION**

**Deadline to submit is April 30, 2025**

Date: \_\_\_\_\_

Project Name \_\_\_\_\_

Person completing application

Name \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Church or Agency \_\_\_\_\_

Mailing Address \_\_\_\_\_

District \_\_\_\_\_ Project starting date \_\_\_\_\_

Continuation of project date \_\_\_\_\_

Have you previously received an Arlean Hall Mission Grant for this project?

\_\_\_\_\_

If yes, indicate the year(s) and amount(s) of previous grants received

\_\_\_\_\_

\_\_\_\_\_

**Describe Project. Please be specific.**

**Describe how grant funds will be used for this project.**

<b>Estimate project cost</b>	
<b>Explain how you will fund the other half or remainder of the project</b>	
<b>Attach a copy of a detailed budget for grant to be considered (*required)</b>	

<b>Amount of Funding Request</b>	<b>\$</b>
<b>Amount of other Sources(s) of Funding</b>	<b>\$</b>
<b>Total Project Cost</b>	<b>\$</b>

**Describe the area where your church or agency is located.**

**Describe your church or agency's mission and efforts in ministry.**

**List the members of the church or agency who will be directly responsible for completing the project.**

NAME	PHONE	EMAIL

\_\_\_\_\_  
**Project Leader**

\_\_\_\_\_  
**Pastor or Director**

\_\_\_\_\_  
**Project Leader Signature**

\_\_\_\_\_  
**Pastor or Director Signature**

**If funds are awarded for this project, to whom should check be made out?**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_