

**Application for Faber Fund
Grant/Loan
(Revised: May 2015)**

Faber Fund Amount Requested _____

Name of Church _____ Date _____

Address _____ City/Zip _____

Contact _____ Phone _____ Email _____

Faber Fund: The Faber Fund was established by the Diocese of Montana in memory of its third bishop, William Faber. The fund receives money from the sale of closed churches and other Diocesan property that in turn is used to provide grants/loans that are used to make improvements/repairs to buildings or other needs designated by Diocesan Council. Funding requests are subject to the availability of fund resources.

Dear Faber Fund Applicant: Prior to consideration of your Faber Fund Application, Diocesan Council requires the following to be current:

1. Parochial Report (Date submitted : _____)
2. Assessments (Annual) (Total paid to date : _____)
3. Audit (Date submitted: _____)
4. ***The church will have raised 33 % of funds prior to submitting a request for Faber funds (other than for emergency situations).***
5. ***No more than \$10,000 will be given in a grant and loans are limited to \$50,000 (if funds are available). Loans will be repaid within five years and payments are quarterly. No interest is charged for Faber loans.***
6. ***Funds are not given retroactively.***

Diocesan Council also requires 2 bids be submitted with this form.

Has your church used the Faber Fund within the last 5 years? Yes _____ No _____

If yes, please explain: (purpose and amounts)

Please list current assets, (if any), including stocks, bonds, and cash not currently invested with the Diocese. _____

Please respond to each of the following:

- 1) For what project will the funds be needed?

2) When is the project to be undertaken?

3) What are the reasons your church cannot afford to underwrite this project? _____

4) What other sources of funds are you seeking (other grants, donations, capital funds drive)?

5) How much money have you raised (or set aside from current funds) for this project? _____

6) Please provide a narrative description of the project and how it will help promote the ministry of your congregation and how the project fits with your overall plan of developing ministry. Please attach documentation of the projected costs and any other information that will aid Finance Department and Diocesan Council in review of your application.

Please return this form to:

The Diocese of Montana
PO Box 2020
Helena, MT 59624

Faber Fund requests are reviewed first by the Finance Department, and then by Diocesan Council. They meet four times per year. Please contact the diocesan office 800-247-1391 for meeting times. **Applications should reach the diocesan office no later than two weeks** prior to the Finance Department meeting. (Note: ***Emergencies will always be promptly considered.***)

Finance Use Only:

Recommend Approval to Council _____
Recommend Disapproval to council _____
Recommend Grant or Loan _____
Returned for further information _____
Date _____ Amount \$ _____

Diocesan Council Use Only:

Approved _____
Disapproved _____
Recommend Grant or Loan _____
Returned for further info _____
Date _____ Amount \$ _____