CAMPUS MINISTRY GRANT

FEEDBACK FORM

Submit to: BC Synod Council Executive

80 East 10 Avenue, New Westminster, BC V3L 4R5

or Email bcsynod@elcic.ca

Name of Congregation/Ministry: City:

1. Proposal Title:

The reporting task need not be onerous, but what we are looking for is hearing your stories, sharing in your learning, and passing them along so they may inspire others.

1. Tell us the story of your project or engagement.

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1. What have you been learning that you’d like to tell us about?

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1. Do you have any thoughts or sense of what God might be inviting you to try next?

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1. Briefly, what impact has this project had on you, on the participants, and on those leading?

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1. Is there anything else you’d like to share?

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1. Financial Reporting

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| Amount of Grant Received |  |
| Expenditures by Category (*e.g., supplies, food, staffing, honorariums, transportation, etc.*) |  |
| Total spent |  |
| Total returned |  |
| Balance |  |
| Signature |  |

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| FOR OFFICE USE ONLY | DATE |
| Received by: |  |  |
| Reviewed by Synod Council Executive |  |  |
| Approved $ |  |  |
| Funds Forwarded |  |  |
| Reflections-Learnings |  |  |
| Financial Reporting Completed |  |  |