



British Columbia Synod
Evangelical Lutheran Church in Canada

ELCIC MISSION FUND

REPORTING FORM

Submit to: bcsynod@elcic.ca

Please take some time to reflect on the questions below and share your stories and learning with us. At the end of the form there is a place for your financial accounting.

Name of Congregation/Ministry:

City:

Experiment Title:

Experiment Date:

1. Briefly describe your experiment.
 - What was the intended outcome?
 - Who was involved?
 - What was the activity you planned?

2. How did you hope people beyond your church community would be involved?

3. Were there any challenges you faced in making your experiment happen? If so, can you share briefly what those were?

4. What did you learn or discover through this experiment?
 - Did it turn out the way you expected?
 - If not, how did it shift or change from what you set out to do?

5. Our God is a God of surprises. In the course of doing this experiment were there any surprises? If so, can you tell us a little more about what these surprises were and how you responded?

6. God is a God of connections. When you think about what you experienced and with whom you connected, what developed in your relationships with others in your community as a result of your experiment?

7. What has the impact of this experiment been on you as leaders of the experiment?
 - How about the rest of your congregation and leadership?
 - Did you hear any comments from people in your community?

8. Can you think of any times during your experiment where you had what you might call "God moments," that is, times when it felt like you caught a glimpse of God's presence?
 - Perhaps in the neighbourhood, in the people you met, or the way that something unfolded?
 - Or might there have been things that may have reminded you of a Bible story or given you a new insight into what Jesus/God/the Spirit might be up to with you, with us as church and those all around us?

9. Is there anything else you would like to share, or that you would like other people to know as a result of having done your experiment?

Financial Reporting

Amount of Grant Received	
Expenditures by Category (<i>e.g., supplies, food, honorariums, transportation, etc.</i>)	
Total spent	
Total returned	
Balance	

Submitted by:

Name(s):

Contact Information (email, phone number):