



Generosity Course
Application

Church/Charge Name _____

Address _____

City _____ Zip _____ GCFA # _____

District _____ County _____

Membership _____ Avg Worship Attendance _____ Annual Budget _____

Duke Endowment-eligible? Y N 2017 Apportionment Paid _____ % Debt Amount _____

Funds held at the United Methodist Foundation of Western North Carolina: _____

Pastor _____ Phone _____

Have you consulted with your District Superintendent and received their recommendation to participate in the course? _____

On an attached sheet, please provide responses to the following:

1. Stewardship resources used in the past (consultants, studies, workshops, etc.)
2. What are the unique and distinct gifts of your congregation?
3. Briefly describe the financial culture of your congregation

Terms and Conditions of the Program

1. The program is for five months, from September 2018 – January 2019. It will require an investment of time from the pastor of about 5 hours per month. It will also require a willingness of the church leadership to engage and invest their time into the process, and provide pertinent financial information.
2. Your application must be accompanied by a recommendation from your District Superintendent to participate in the program.
3. The program is a \$1,750 value. Thanks to the Duke Endowment and the Districts of the WNCC, each church's investment is only \$500, which is payable upon acceptance into the program.

On behalf of _____ United Methodist Church, we submit this application for the year-long course to deepen our culture and practice of generosity. If accepted we are committed to engaging in the program, including through our time and resources.

Pastor Signature Printed Name Date

Chair of Governing Body Signature Printed Name Date

Submit completed application, by August 31, 2018 @ 5pm, to:
Joyful Giving Group LLC, 7825 NC Hwy 68 N, Stokesdale, NC 27357 or email to AJ@JoyfulGivingGroup.com