**Thank you for your recent enquiry. We would welcome completion of this Expression of Interest Form, which will assist the Mission Grants Committee to ascertain the most suitable pathway for you to proceed with your application for a BUV Mission Grant.**

**Please send your completed form to:**

Charlene Delos Santos, Admin Assistant Mission Catalyst Team

Email: [charlene.delossantos@buv.com.au](mailto:charlene.delossantos@buv.com.au)

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| --- | --- |
| **Name:** |  |
| **Title/Role:** |  |
| **Organisation:** |  |
| **Mobile:** |  |
| **Email Address:** |  |
| **Date:** |  |
| **Please tell us about your missional project?** | |
| **Who is involved in your missional project?** | |
| **Where and how did it originate?** | |
| **What are your proposed strategies to accomplish it?** | |
| **What Baptist affiliation is envisaged with this initiative?** | |
| **How might this develop into a community of faith?** | |
| **What background experiences/gifts and/or qualifications do you have to make this a reality?** | |
| **Realistically, sustainability is difficult, how do you imagine your project can be sustained?** | |
| **Do you have other pathways or options for funding your project?** | |
| **Please provide information how this project will make a contribution to the community?** | |
| **Our Mission Grants is tied to specific pathways of training, dependent upon the particular pioneering initiative. Are you prepared to undertake further training for equipping and securing greater success in your endeavour?** | |
| **What product or resources will your project produce that could be shared with the wider BUV?** | |
| **Please add any information that will strengthen your submission e.g., facilities available, initial capital on hand, strategic plan, financial projection, anticipated risks and risks mitigation strategies, and what result are you expecting to come out of this initiative/project?** | |

*A member of the Mission Catalyst Team will contact you upon review of this Expression of Interest to help refine your pioneer pathway in order to align with your mission grants funding application*

**BUV OFFICE ONLY:**

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| **Date Expression of Interest Form Received:** |  |
| **Expression of Interest Reviewed by:** |  |
| **Pioneer Pathway Recommendation:** |  |
| **MC Team member to Follow-up:** |  |
| **Outcome & Further Actions:** |  |