Applications are due by Monday, February 15, 2021. Awardee(s) will be announced at Mennonite Health Assembly’s closing session on Thursday, March 11th.

**Applicant Information**

Last name:

First name:

Email:

Phone number:

**MHS Member Organization Information**

Organization name:

Organization Mission Statement:

Organization Vision Statement:

2021 Budgeted Annual Operating Expenses:

**Grant Information**

Project title for this grant: (limit to 100 characters):

$

Amount requested (up to $3,500):

Brief description of the new innovation: (limit 100 words):

How will your organization use the grant money, if awarded, for this new innovation? (limit 100 words):

Grant is intended to fund new innovations that will enhance health and human service programs at MHS member organizations. How will this project impact your organization’s ability to deliver services? (limit 300 words)

It is MHS’s mission to inspire and strengthen health and human service ministries to fulfill their missions. Briefly describe how this project supports your organization’s mission and vision. (limit 300 words)

MHS is anchored in Anabaptist values. Efforts that demonstrate alignment with and/or support of Anabaptist faith and values will be given preference. How is this project in alignment with and/or supportive of Anabaptist faith and values? (limit 300 words)

Projects that support diversity, equity and inclusion will be given preference. How does this project support diversity, equity and inclusion? (limit 300 words)

If your grant request was not funded OR was partially funded, how would that affect the project? (limit 100 words)

Email your organization’s most recent Form 990 and consolidated budget for this year to [info@mhsonline.org](mailto:info@mhsonline.org) before the application deadline.

By checking this box, you indicate your agreement to allow MHS to provide information about the MHS Innovation Grant, if awarded to your organization, on the MHS website and MHS marketing materials at MHS’ discretion. You additionally agree to provide to MHS an impact report by December 31, 2021 detailing the project and use of the funds, if a grant is awarded.

My electronic signature below indicates that the information contained herein, is accurate and truthful to the best of my knowledge. (Chris - this can be typed in as a signature or use a free widget, if available, to add a signature – not something to spend a lot of time on)

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Incomplete applications will not be considered. Please double check that the application has been fully completed.***