

Spirit of MDS Fund Application for COVID-19-related needs

To apply for funding, fill out this form, then save and e-mail it to somds@mds.mennonite.net. You can also print it and mail to **MDS Canada**, 200-600 Shaftesbury Blvd., Winnipeg, MB R3P 2J1

Name of person making the application/contact person for MDS (Mennonite Disaster Service):

Name of congregation: _____

Congregational affiliation (conference or denomination): _____

Address (street, city/town, postal code): _____

E-mail: _____ **Phone:** _____

Church website: _____

Amount applying for (max. \$1,000): _____

We realize you may not know exactly how you will use the funds. Please share to the best of your ability how funding from MDS can help you respond to the COVID-related needs in your community, or why COVID-19 is prompting you to respond (e.g. because needs in your community have risen because of the virus, or because it has impacted your ability to serve people due to fewer donations or less food dropped off for the food pantry, etc.)

What do you need assistance for? (the need or needs you want to address)

How do you plan to meet this COVID-related need? (How will you use the fund to meet needs caused by COVID-19? How will it be disbursed? By who?)

When do you expect to start using the funds?

What is the duration of the project?

- We agree to send MDS Canada a report about how the funds were used no later than 30 days after they are disbursed. (Note: Funds will not be granted without checking this box.)
- We are open to sharing this story with MDS Canada, to tell the story of the church in action in response to COVID-19.
- This application has been approved by our church leadership (council, moderator, etc.).

Name and e-mail address of leadership person: _____

***Thanks for applying! It's our privilege to come alongside local congregations at this time
"in the spirit of MDS."***