



Equipping spiritual leaders to transform the world

Application ID # \_\_\_\_\_  
(to be filled in by the MROC)

**BALTIMORE-WASHINGTON CONFERENCE  
OF  
THE UNITED METHODIST CHURCH  
MINISTRY RELATIONSHIP APPLICATION**

*Please enter the following information on this fillable form.*

Name of Organization: \_\_\_\_\_

Name of Program (if applicable): \_\_\_\_\_

Executive Director/Organization Chair: \_\_\_\_\_

Organization Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Website (if available): \_\_\_\_\_

Name of Contact (*person most knowledgeable about the application*): \_\_\_\_\_

Contact Title: \_\_\_\_\_

Address (if different than above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

***A letter will be sent acknowledging receipt of your application. Applications will be reviewed and evaluated by the Ministry Relationship Oversight Committee (MROC), which meets quarterly. Upon completion of its review, the MROC will brief the Discipleship Council on the MROC's recommendations and/or actions taken. If the application is recommended for a ministry relationship, the MROC, in consultation with the organization will prepare a ministry relationship agreement. Prior to presentation at the next Annual Conference for approval, the MROC will present the agreement to the Discipleship Council. The Bishop and the BWC Chancellor will then review the agreement. No agreement may become effective prior to approval by the Annual Conference of the BWC.***

***Please include the following information in your application***  
**Narrative (3-page maximum)**

**1. Organization**

- a. Mission statement
- b. Brief history (50 words or less)
- c. Concise description of the organization
- d. Concise description of specific program(s) for which a relationship is desired, if applicable

**2. Relationship Details**

- a. **Duration:** How long do you anticipate this relationship to continue?  
\_\_\_\_\_ 1-3 years \_\_\_\_\_ 3-5 years \_\_\_\_\_ over 5 years
- b. **Goals/Objectives:** List the goals and objectives that define how the relationship will further the mission and purpose of BWC. What specific things will you do to achieve your goals?
- c. **Demographics:** Whom does your organization serve (number, ages, and geographic area)?
- d. **Performance Evaluation:** How will you evaluate the achievement of your goals and objectives?
- e. **Partnerships:** List organizations you partner with or plan to partner with including a brief description of the partnership arrangement.

**3. Financial Information**

- a. Start-up or new entities: Provide the operating budget for the current year and when available, a proposed budget for the next year.  
Existing entities: Provide the operating budget for the prior year, current year, and when available, a proposed budget for the next year.
- b. List names of current or anticipated funders, agencies or other sources of funding.
- c. If you are seeking financial support from the BWC, please indicate the amount and how it will be used.

**4. Other Support**

- a. Indicate any non-monetary support that you are seeking from the BWC.

**Required Attachments**

1. Board of Directors/Trustees (name, position, years with organization)
2. Organization's financial statement for the most recently completed fiscal year compared to budget
3. Organization's current year-to-date financial statement compared to current year budget
4. Letter(s) of agreement from partner organization(s), if applicable
5. IRS documentation of 501(c)(3) status or other tax status, if applicable

***Additional information requests must be received within 15 days. If not, the application must be resubmitted with the additional information.***

***Please note that this signature page must be completed. Applications submitted without signatures will not be considered.***

**SIGNATURE & DATE**(Please sign and date)

Executive Director: \_\_\_\_\_  
Print Name

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

Organization Chair: \_\_\_\_\_  
Print Name

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

**ACTION BY MROC COMMITTEE:**

Date received: \_\_\_\_\_ Date reviewed by MROC: \_\_\_\_\_

Date referred back to organization for more information: \_\_\_\_\_ Date received: \_\_\_\_\_

Special Requirements(if applicable):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MROC Recommendation:

\_\_\_ Approved for Ministry Relationship Agreement process Date: \_\_\_\_\_

\_\_\_ Not Approved for Ministry Relationship (See comments below) Date: \_\_\_\_\_

Committee Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Discipleship Council briefed: \_\_\_\_\_

\_\_\_ Approved for Ministry Relationship Agreement process Date: \_\_\_\_\_

\_\_\_ Not approved for Ministry Relationship Date: \_\_\_\_\_

Discipleship Council Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_