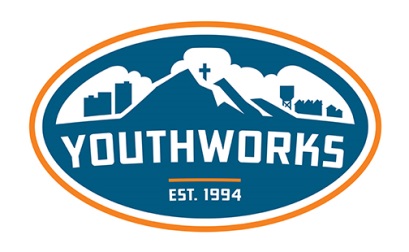
**  
YOUTHWORKS ALUMNI**

**STAFF MISSION FUND**

**PROGRAM GUIDELINES & APPLICATION FORM**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Program Guidelines:**  YouthWorks Alumni Staff Mission Fund (YWASMF) exists to support YouthWorks alumni summer staff in continuing their pursuit of mission experiences. YouthWorks alumni can receive $100—$250 for their next mission experience with a church, academic institution or nonprofit organization.   * Applications are accepted from alumni summer staff, part-time and full-time staff. * A completed application is required to be considered, but does not guarantee financial support. * A prayer and/or support letter should be included with the application if available, but it is not required. * Applications must be submitted prior to the mission experience. * Mission experiences requiring funding less than $1,000 are not eligible for a YWASMF grant. * Checks will be made out to the mission organization or church the applicant is serving with, not the applicant. * Alumni are eligible for only one YWASMF grant each calendar year, and can only reapply for a grant if they have served the summer preceding the request. * There are limited funds available each quarter. When the funds have been depleted, applicants will be encouraged to apply the following quarter. * Have additional questions about YWASMF? Contact Lindsay Crye at 612.746.6425 or [Lindsay.crye@realresources.com](mailto:Lindsay.crye@realresources.com)   **Funding Scale:**   * Funding required >$5,000- eligible for $250 grant * Funding required <$5,000- eligible for $100 grant\*   \*Mission Experiences requiring finding less than $1,000 are not eligible for a YWASMF grant. | | | | | | | |
| ***Alumni Information*** | | | | | | | |
| **Name** | | | **Home street address** | | | | |
| **Phone number** | **Email address** | | **City** | | **State** | | **Zip Code** |
| ***YouthWorks History*** | | | | | | | |
| **Community** | **Position** | **Year** | **How did you find out about the YWASMF?** | | | | |
| **Community** | **Position** | **Year** |
| ***Missions Experience Information*** | | | | | | | |
| **Location** | **Date{s}**  mm/dd/yyyy**to**mm/dd/yyyy | | **Total cost** | | **Date funds need to be secured**  mm/dd/yyyy | | |
| **Explain the purpose of this missions experience** | | | | | | | |
| **Why have you chosen to participate in this mission experience?** | | | | | | | |
| ***Financial Information*** |  | |  | |  | | |
| **Make check payable to** | | | **Address** | | | | |
| **Memo line on check** | | | **City** | **State** | | **Zip Code** | |
| **EIN Number of the Mission Organization or Church** | | |  |  | |  | |
| ***Signature*** | | | | | | | |
| **I,      , certify that I have reviewed and understand the YWASMF guidelines.** | | | | | **Date** | | |

Submit by email or mail:

[lindsay.crye@realresources.com](mailto:lindsay.crye@realresources.com)

Real Resources Foundation

Attn: YWASMF

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