



Mountain Desert District  
Unitarian Universalist Association

**Application for Assistance through the Chalice Lighters Program**

Congregation:

Address, City, State, Zip:

Phone:

Our Contact Person is:

Contact Person Address:

Phone:

(Please feel free to use additional pages for your responses)

1. We request a Chalice Lighter "Call" be made to assist our congregations as checked:
  - to establish a new congregation
  - to establish or increase paid professional ministerial leadership
  - to establish or increase paid Religious Education leadership
  - to assist with a building project
  - other special extension projects
  
2. Background Statement / description of need for project:
  
3. Describe the specifics of your project. Please include the proposed budget for the project and list what resources and/or finances are available from your congregation to help with the project.
  
4. Describe the potential impact on the growth of Unitarian Universalism through this project.
  
5. By what criteria will you determine the success of this venture?

We are an Annual Program Fund Honor Society    \_\_\_ Yes    \_\_\_ No  
 We are a District Assessment Honor Society    \_\_\_ Yes    \_\_\_ No  
 We will provide reports and appoint liaison per MDD Chalice Lighter guidelines    \_\_\_ Yes    \_\_\_ No

Number of members: \_\_\_\_\_ Number of pledging units: \_\_\_\_\_

Approved by the board of Trustees of our congregation on: \_\_\_\_\_(date)  
 Submitted by: \_\_\_\_\_ (name) \_\_\_\_\_(title)