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| Parish name: |  |
| Brief description: |  |

**Provide an explanation of the project and the need behind the requested loan to your PCC. Why do you need this loan? What other avenues have you explored?**

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| **No.** | **Consideration** | **Comment / response** |
| 1 | Please confirm that you have read the Diocesan policy on loans to PCCs |  |
| 2 | How much loan are you requesting? |  |
| 3 | What is the requested duration of the loan? |  |
| 4 | When will you need to draw down the loan? |  |
| 5 | Which of the strategic priorities does this loan align with? (see below) |  |
| 6 | How will the diocese assess the effectiveness of this loan in terms of your meeting the desired objective/purpose? |  |
| 7 | What are the risks that this loan will not meet your missional or financial objectives? |  |
| 8 | Are there any other factors that mitigate these risks? |  |
| 9 | How frequently will you report to the diocese on the performance of the project behind this loan [[1]](#footnote-1)? |  |
| 10 | Are there any adverse consequences that could stem from this loan? |  |
| 11 | Did you pay your MMF in full last year? |  |
| 12 | Do you pay your MMF monthly? |  |
| 13 | Please confirm that you intend to pay your MMF in full this year, or explain why not. |  |
| 14 | What is the source of funds that you intend to use to repay the loan? |  |
| 15 | What is the value of your PCC’s funds at present:  Unrestricted: £  Restricted: £  Endowment: £ |  |
| 16 | Please explain the nature of the restrictions on any restricted / endowment funds: |  |
| 17 | Please list and attach any additional information that you consider the diocese should be aware of in assessing your application . |  |

## PCC approval

Application for a loan approved by PCC meeting on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date)

Application form signed by:

Incumbent / PCC Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

PCC treasurer/ church warden: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**Please return this form to** [**fundsformission@truro.anglican.org**](mailto:fundsformission@truro.anglican.org)

## To be completed by the diocese

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| --- | --- |
| Reference number | SI002/ |
| This investment was considered at the meeting of: | FAR |
| Date of meeting |  |
| Based on the above, is the investment approved? |  |
| Are there any conditions on the approval? |  |

**Strategic priorities:**

1. A Church that celebrates children and young people at its heart:
2. A Church that embraces an innovative and pioneering culture:
3. A Church that is being transformed from the inside out:
4. A Church that rejoices in its international links
5. A Church that rejoices in the generosity of God

1. The minimum reporting period is six-monthly. [↑](#footnote-ref-1)