

INGATHERING – Hope for Humanity

Church Reversion Policy Kentucky-Tennessee Conference

According to Guidelines voted by the North American Division, Ingathering Funds will be distributed as follows:

- 40% will be used for international projects
- 10% will go to the North American Division to be used for Disaster Relief, and other projects in inner cities and disadvantaged areas.
- 25% will go to the local conference for conference-wide Community Services and/or Disaster Response projects.
- 25% may be returned to local churches according to established guidelines, for accredited Community Services or Projects.**

Guidelines

- Churches in the Kentucky-Tennessee Conference may request Ingathering Reversion funds for local projects and services using the Reversion Application form. (A Request Form is provided by the Conference ACS Department).
- The local church may receive **up to 25%** of the previous year's Ingathering total for the church for **accredited** projects.
- The local Community Services Center or Unit must submit an Annual Report for the previous year to the appropriate entities (Local Conference, Union, and NAD).
- Funds must be used for specific projects that are designed **to benefit the community** in some way. A partial listing of accredited projects is on the next page.
- Funds should be kept separate from other local ACS funds and used only for project(s) approved by the Conference Administration.
- Use of Ingathering Reversion funds received is subject to audit.
- Surplus funds (funds not distributed to local churches any given year) will be placed in a separate fund at the conference to be used for pilot/experimental Community Service projects where extra funds are needed.

Qualifying Projects - *If your project is not listed, please contact the Conference ACS Director for approval.*

| | |
|----------------------------------|--------------------------------|
| Alcohol Prevent/Recovery | Health Appraisals |
| Baby Care Class | Health Screening |
| Bags of Love | Home Nursing Class |
| Clothing/Bedding Program | Homeless Shelter |
| Cooking School | Immigration Assistance |
| Counseling Services (Non-Member) | Job Training Program |
| Day Camp | Language Program (Non-Member) |
| Dental Clinic | Literacy Program |
| Disaster Response | Marriage Seminar (Non-Member) |
| Divorce Recovery Seminar | Meals on Wheels |
| Domestic Violence Program | Medical Clinic |
| Drug Abuse Detox | Parenting Seminar (Non-Member) |
| Drug Abuse Prevention | Preparing For Baby Class |
| Drug Abuse Rehabilitation | Prison Dress-out Program |
| Families of Prisoners | Prison Ministry |
| Family Finance Seminar | Refugee Resettlement |
| Family Life Workshop | Soup Kitchen |
| First Aid Class | Stop-smoking Program |
| Food Pantry | Stress Seminar |
| Food Distribution | Tutoring Program |
| Grief Recovery Seminar | Vision Clinic |
| Handicap Services (Non-Member) | Weight Control Program |

INGATHERING – HOPE FOR HUMANITY
Reversion Application

Date _____

This application is being made for funds remitted in the _____ **INGATHERING – HOPE FOR HUMANITY** Campaign. (Year)

Name of Church _____

Person making the request _____
Name Position

Amount Requested (may be up to 25% of total remitted to the conference for the **Ingathering – Hope for Humanity** campaign in the year for which this application is being made)
\$ _____

Please Note: All expenditures of **Ingathering – Hope for Humanity** Reversion funds must be in accordance with North American Division guidelines and are subject to audit.

List the Project(s) for which the funds will be used and give a brief description (use the back of this page or additional sheets, if necessary):

1. _____
Amount \$ _____
2. _____
Amount \$ _____
3. _____
Amount \$ _____
4. _____
Amount \$ _____
5. _____
Amount \$ _____

Date of Board Action authorizing this request _____

Signature of person making this request

Signature of Church Board Chairperson

Please complete this form and send it to Steve Rose at srose@kytn.net or Kentucky-Tennessee Conference, P. O. Box 1088, Goodlettsville, TN 37070-1088.

For Office Use Only

\$ _____ X 0.25 = \$ _____

Approved by _____