



# APPLICATION FOR MISSIONARY SUPPORT

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email / Blog: \_\_\_\_\_

US Address: \_\_\_\_\_

\_\_\_\_\_

Family Serving with You

Relationship

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service Location: \_\_\_\_\_

Sending Organization: \_\_\_\_\_

Organization Website: \_\_\_\_\_

Start Date: \_\_\_\_\_

Length of Term: \_\_\_\_\_

Dollar Amount Requested: \_\_\_\_\_

*(Please attach a copy of your most recent financial plan)*

<b>HOME CONGREGATION:</b> _____
<b>ADDRESS</b> _____ _____
<b>PASTOR:</b> _____
<b>PHONE/EMAIL:</b> _____
<b>SUPPORT:</b> <b>Missionary Support Team</b> _____ Yes _____ No
<b>Contact Name</b> _____
<b>Phone or Email:</b> _____

Tell us about your calling/work: *(attach additional documents as needed)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed\* \_\_\_\_\_

Date \_\_\_\_\_

Spouse\* \_\_\_\_\_

Date \_\_\_\_\_

\*By signing you are affirming your support of the Confession of Faith in a Mennonite Perspective

Return completed application to [office@stumptown.church](mailto:office@stumptown.church). Renewal Application deadline is August 1. Please allow up to 4 months for complete processing of application