

APPLICATION FOR NEW LIFE GLENSIDE MISSIONS MENTORING FUNDS

The Missions Mentoring Fund is intended for the encouragement and assistance of church members who are investigating a possible missionary vocation. It is administered by the Missions Committee.

NAME: _____ **DATE:** _____
ADDRESS: _____ **PHONE:** _____
_____ **AGE:** _____

EMAIL ADDRESS: _____

I am a member of New Life Church: Yes _____ No _____

I have been attending New Life for about _____ years.

I am seeking financial help for the following activity (select one; include brief description for whichever applies):

- ❖ Conference (e.g. Urbana): _____
- ❖ Missions course (e.g. Perspectives): _____
- ❖ Field Exposure Trip: _____
- ❖ Missionary Internship (up to 12 months): _____

Please provide more specifics as warranted (attachments are welcome).

Date(s) of activity: _____

Total cost of activity: \$ _____

For Field Exposure trips and missionary internships:

Mission agency: _____

Mission agency contact: _____ Phone _____

Specific Field: _____

APPLICATION FOR MENTORING FUNDS (CONTINUED):

NAME: _____ **DATE:** _____

PLEASE DESCRIBE BRIEFLY HOW YOU CAME TO BE PURSUING THIS ACTIVITY:

PLEASE DESCRIBE YOUR GOALS FOR THIS ACTIVITY OR WHAT YOU HOPE TO LEARN:

ARE THERE ANY OTHER WAYS THE MISSIONS COMMITTEE CAN BE PRAYING FOR YOU?

**PLEASE SEND COMPLETED FORMS TO MISSIONS COMMITTEE CHAIR:
KURT WOOD, 1871 KEITH RD, ABINGTON PA 19001 or
kurtawood@gmail.com**