

**The Village Presbyterian Church of Northbrook  
MISSION COUNCIL  
1300 Shermer Road  
Northbrook, IL 60062**

**APPLICATION FOR SHORT-TERM MISSIONARY SUPPORT**

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

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Email: \_\_\_\_\_

Birthdate: \_\_\_/\_\_\_/\_\_\_      Marital Status: Single/Married/Divorced

Name of Spouse: \_\_\_\_\_

Names and Ages of Children \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

Occupation: \_\_\_\_\_

If Student: School: \_\_\_\_\_

Class: \_\_\_\_\_ Major: \_\_\_\_\_

The Village Presbyterian Church Membership Information:
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Member \_\_\_\_\_      Date Joined \_\_\_\_\_      Have Attended Since \_\_\_\_\_

Associate Member \_\_\_\_\_      Non-Member \_\_\_\_\_

**REFERENCES:**

Please give the names, full addresses and telephone numbers of at least **THREE** individuals whom we may contact.

FIRST & LAST NAMES	ADDRESS	<u>PHONE #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

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BRIEFLY STATE YOUR CHRISTIAN BELIEFS AND WHERE YOU ARE CURRENTLY IN YOUR  
“WALK WITH CHRIST.” (Use back of page for longer reply.)

WHY DO YOU FEEL CALLED TO SHARE CHRIST’S LOVE WITH OTHERS AND HOW DO YOU  
THINK GOD WILL USE YOU TO IMPACT THEIR LIVES?

WHAT IMPACT DO YOU THINK THIS EXPERIENCE WILL HAVE ON YOUR CHRISTIAN  
GROWTH?

WOULD YOU BE WILLING TO SHARE YOUR EXPERIENCE, AFTER YOU RETURN, WITH THE  
MISSION COUNCIL AND OTHERS IN THE CHURCH? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, HOW WOULD YOU LIKE TO SHARE WITH OTHERS?

MINISTRY INFORMATION:

Name of Ministry: \_\_\_\_\_

Ministry Address: \_\_\_\_\_

Length of Service: \_\_\_\_\_

Destination of Service: \_\_\_\_\_

WHAT TYPE OF MINISTRY WILL YOU PERFORM?

WHAT SPECIAL SKILLS CAN YOU OFFER THIS MINISTRY?

FINANCIAL INFORMATION:

What is the anticipated cost for this trip? \_\_\_\_\_

If travel and other expenses are known, please list:

What portion of the total cost will you be able to personally contribute? \$ \_\_\_\_\_

Do you anticipate other donations or fund raising activities?

YES \_\_\_\_\_ NO \_\_\_\_\_ Estimate amount \$ \_\_\_\_\_

Please give additional information you feel would be helpful in considering this application: