

Application for Financial Support

- Long Term (3yrs+)
- Mid Term (1-3 yrs)
- Short Term Project / Trip (<1yr.)

Contact Information

Full Name:

Last First Middle

Mailing Address:

Phone # (Home) Email

Phone # (Mobile)

Education/Training

| School | Degree/Certification | Skill/Specialty/Major Obtained | Dates Attended |
|--------|----------------------|--------------------------------|----------------|
| | | | |
| | | | |
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| | | | |

Are you currently a member of First Covenant Church (FCC)? If not, what is your connection with FCC?

Do you regularly attend FCC?

Are you a follower of Jesus Christ? If yes, briefly explain your testimony of how your came to follow Jesus Christ.

Describe how you became interested in missions/Christian service? What inspired you to work with this organization?

Describe previous missions/Christian service experiences including dates (use additional sheet of paper if more space is needed).

Name/Contact Information of Organization with which you will be serving

What is the total of the financial support needed to be fully funded?

| | | |
|----------|----|----------------------|
| One-time | \$ | <input type="text"/> |
| Monthly | \$ | <input type="text"/> |
| Annually | \$ | <input type="text"/> |

What is the desired financial giving from FCC?

| | | |
|----------|----|----------------------|
| One-time | \$ | <input type="text"/> |
| Monthly | \$ | <input type="text"/> |
| Annually | \$ | <input type="text"/> |

How much financial support has been raised to date?

| | | |
|----------|----|----------------------|
| One-time | \$ | <input type="text"/> |
| Monthly | \$ | <input type="text"/> |
| Annually | \$ | <input type="text"/> |

PLEASE PREPARE A LIST OF REFERENCES WITH CONTACT INFORMATION OF PEOPLE NOT RELATED TO YOU.

2 REFERENCES FOR SHORT TERM APPLICANTS
4 REFERENCES FOR MID/LONG TERM APPLICANTS

Please mail this application and supporting documents to:
First Covenant Church
Attn: Missions Board
4000 Redwood Rd.
Oakland, CA 94619

Signature _____

Date _____