



WAIPUNA

Chapel

Love God • Love Others • Serve The World

Waipuna Chapel Short-term Mission Support Application

General Information

Name: _____ DOB: _____

Email: _____ Tel#: _____

Marital Status: _____

Pastoral Reference:

Name: _____

Church: _____ Tel# _____

Additional Personal References:

1. _____ Tel# _____

2. _____ Tel# _____

Emergency Contact:

Name: _____ Tel# _____

Mission Information:

Destination: _____

Mission Dates: From _____ To: _____

Mission Organization/Affiliation:

Mission Leader Name: _____ Tel# _____

Summarize Mission Objective:

(Review Expectations for Short-term Mission Teams From Waipuna Chapel Guidelines)

Spiritual Background/ Experience

Are you a member of Waipuna Chapel? Yes No

Are you a member of another Church? Yes No

Are you currently serving in a ministry at Waipuna Chapel? Yes No

Are you currently serving in a ministry at another Church? Yes No

If yes, please describe:

Write a brief summary of your Faith journey

List any short-term or long-term mission's experience:

Please list any local outreach experience:

Personal Growth objectives during mission trip:

Support Requested

Please indicate the type of support you are requesting from Waipuna Chapel's Missions committee:

Please list the expenses pertaining to your short-term trip as accurately as possible:

Travel expenses: \$ _____
Medical Expenses: \$ _____
Ministry Expenses: \$ _____
Total support needed: \$ _____
Total support raised to date: \$ _____

Date support is due: _____

Do you currently have any significant debts or financial obligations? Yes No
If yes briefly describe:

If Waipuna Chapel decides to financially support my ministry, I will commit to the following:

1. Write a 1-3 page summary of my short-term ministry experience after returning from my short-term mission trip
2. Prepare a 10minute presentation of my short-term mission experience.
3. Be willing to present my experience to the congregation or life groups at Waipuna Chapel.
4. Be creative, we just want to hear from you.

Signature _____ Date _____

Application Discussed on Date: _____

Additional Info Required from Applicant:

Approved Yes No

Amount \$ _____

Signed _____ Date _____

Waipuna Chapel Mission's Committee