

Mission Partner Application Form for 2020-2021

This form is to be filled in by a 'Missions Initiative Leader' (see below) and returned to the 'St. Michael's Lutheran Church Missions Selection Committee'

SMLC Mission: Welcoming and loving our neighbors in response to God's love.

Emphases

1. In general, our focus of mission interest is as wide as the Great Commission. However, the Holy Spirit is currently leading our church to focus on:
 - a. Living out contagious joy in daily life
 - b. Loving and welcoming neighbors in our community
 - c. Engaging in spiritual conversation with people disconnected from Christ
 - d. Knowing & sharing personal witness with others
 - e. Church planting both locally and overseas
 - f. Preparing, sending out, and supporting disciples
2. We also expect that, through the Mission Partner application process, the Holy Spirit will open our eyes to new avenues of participating in God's mission.

Criteria

The Mission Partner Selection Committee evaluates each mission according to these factors:

1. The mission's primary focus is evangelism and is effectively reaching the lost. (The purpose of Mission Partnering is not necessarily to raise funds for capital projects or long-term missionaries.)
2. The mission has a Biblical foundation. The mission presents opportunities for hands-on involvement of our members.
3. Each mission must have a designated Strategic Initiative Leader at St. Michael's.
4. The mission "has its act together" administratively and has a verifiable track record.
5. The mission is financially responsible and has a significant level of need. (As part of your application process, you must attach a current 501(c)3 tax-exempt certificate and current annual financial statement.)

Procedures

1. Each prospective Strategic Initiative Representative interested in the Mission of the Month must complete this form and submit it to the church office by **Feb. 29, 2020**.
2. New and previous participants must submit an application each year.
3. The **Selection Committee** will meet in **March 2020** to designate the missions for July 2020 to June 2021 Mission Partners. Their selections will be primarily focused on local missions.
4. If necessary, the Partner Selection Committee will contact you for further information.
5. You will receive notification of the result of your application in April.

Missions Initiative Leader:

The Missions Initiative Leader is a member of St Michael's who is willing to be a liaison between the organization and the Mission Partner Selection Committee.

Duties include: (a) Setting up opportunities for SMLC members to have hands-on involvement in a mission's activity and/or event, and communicating with SMLC Missions Committee in accomplishing these opportunities in a timely manner (b) publicity for the designated time period through the weekly newsletter, website, bulletin, PowerPoint presentation and a lobby display; (c) arranging a brief video presentation and/or personal presentation in Worship services. (If your application is successful, you will receive further instructions including the time period that you have been selected for.)

Are you willing to be St. Michael's contact person for this mission? Yes ___ No ___

Your Name _____ Phone _____

Address _____

Email Address: _____

Please return to: Missions (missions@smlcb.org) or drop off in church office
St Michael's Church, 9201 Normandale Blvd, Bloomington, 55437. Office: 952-831-5276

Mission Information

Name of Mission: _____

Mailing Address: _____

Phone: _____

Staff contact person: _____ Email: _____

Mission Website, Facebook etc address _____

Please describe your involvement with this mission (e.g. supporter, volunteer, employee, etc.)

Please describe the mission as it relates to each of the criteria listed below:

1. The mission's primary focus is evangelism and is effectively reaching the lost (please give examples).

2. The mission has a Biblical foundation.

3. The mission has a verifiable track record of outcomes (please share examples and/or metrics).

4. The mission is financially responsible and has a significant level of need. (Please provide examples of the areas of need.)

- I have attached a current 501(c) 3 tax certificate. Yes ___ No ___
- I have attached a current annual financial statement. Yes ___ No ___

5. The mission presents opportunities for hands-on involvement of our members. (Please provide examples of possible opportunities and date offerings if your organization has serving events)

6. Are there any age restrictions or limitations for serving event offerings?

Please attach any flyers, brochures, etc.that will inform the committee about the mission.

Date: _____ Signature_____