

Guidelines and Application Form For LWML Mission Trip

Send application form to V.P. of Mission Outreach, Linda Bruski, 323 John R St., Clare, Michigan 48617-1223. Application for Panama deadline is May 14, 2010.

Person requesting funds:

- Must be an **active** LWML member of the Michigan District unless the applicant is considered necessary to facilitate the mission e.g. translator to a skilled worker, etc.
- Must be a member of a LCMS congregation and in good standing with their church body and be willing to collaborate in group efforts.
- Must be willing to present to LWML Societies, Zones or the District after the mission trip.
- Must be willing to provide additional information if deemed necessary by the review committee.
- Must meet the deadline of 60 days prior to departure date for requesting funds as determined by each trip.
- Applications will be accepted by the order in which they are received. For instance if there are only 8 openings for the trip and 10 apply, the first 8 will be considered.
- Must reimburse the District if applicant decides not to go on the trip after monies can no longer be recovered unless there is an acceptable reason for cancellation, to be determined by the committee.
- The money awarded will be up to and not to exceed 30% of total cost of the mission trip for this biennium.

Please print with black ink or type to apply for funding towards the mission trips for the 2010-2012 biennium. The signatures of your Society President/Chairwoman, Zone President are requested as well as the Pastor of your congregation. Please read guidelines for eligibility before completing application.

I _____ have been accepted as a member of the mission trip to _____ on _____ and am applying for funding from money made available through "Michigan Women in Mission through MOST ministries" grant voted on at the 2009 MI District of LWML convention.

Address _____

City _____ State _____ Zip _____

E-mail address _____ Phone _____

Date funds are needed _____

I, _____ **Society President/Chairwoman**, recommend/do not recommend that _____ be awarded funding for the above mentioned mission trip.

Comments: _____

Date _____

I, _____ **Zone President**, recommend/do not recommend that _____ be awarded funding for the above mentioned mission trip.

Comments: _____

Date _____

I, _____ **Pastor** of applicant's church, recommend/do not recommended that _____ be awarded funding for the above mentioned mission trip.

Comments: _____

Date _____