## LAKE UNION CONFERENCE

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## Youth/Young Adult Evangelism Support Application Form

The purpose of this form is to support youth/young adults age 35 and under to share the risen Christ within the Lake Union Conference states.

LEADER INFORMATION			
Name:		Date:	
Address:			
City:			
E-mail:		Phone:	
Level of Education Achieved:			
MISSION STATEMENT/PROJECT D	ESCRIPTION		
A mission statement explains the main	aim or purpose o	of a church or or	ganization succinctly.
Mission Statement:			
Partners/Counselor/Mentor			
Who are you partnering with for this pro	oject?		
Email:		Phone:	
Who are you talking to for project couns	sel/advice?		
Email:		_ Phone:	
Who is your mentor for this project?			
Email:		Phone:	

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PROJECT DATE(S)/LOC	CATION		
Date(s):			
Location (if needed):			
D			
BUDGET/EQUIPMENT			
Budget Requested by the LI	JC Youth Evangelis	m Fund:	
What amount of money will	be raised on top of	the LUC Youth Evangelism money reque	sted?
raised.):		the LUC Youth Evangelism fund a dollar	will be
What kind of ministry result	s do you expect?		
How will you <u>measure</u> and <u>c</u>	document the minist	ry results and by <u>when</u> ?	
What Bible text(s) and/or Sp	oirit of Prophecy que	ote(s) supports this evangelism project?	1
SIGNATURES			
Applicant	Date		
Local Pastor/Mentor	Date	Conference/Union Youth Director	Date
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