

PLANT TO HARVEST MISSION PROJECT

Application for Assistance from the National Youth Ministry

CHURCH DETAILS Church Name: _____ Physical Address: _____ _____ Code: _____ Phone: _____ Email: _____ District: _____ District President: _____	PASTOR'S DETAILS Surname: _____ First Name: _____ Physical Address: _____ _____ Code: _____ Phone: _____ Cell: _____ Email: _____
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Does this request have your District President's approval? _____ yes _____ no

District President's Signature: _____

(Please note that all projects must be approved and submitted by the district officers and have the signature of the District President.)

Please give a description of the mission project. Include the purpose, plan, and cost with quotations attached. _____

Would this mission project also involve a PTH mission team coming? (e.g. evangelism, hands on work, etc.) _____

How is this project missional? _____

For District Officers:
Once completed, this form should be submitted to the National Youth Committee. Once approved by the General Officers we cannot guarantee funding or a time frame for funding but we will do our best to meet needs as PTH funds become available.

Thank you for partnering with us to plant a seed to win the harvest of souls for the kingdom of God.