

Date:				
PERSONAL INF	ORMATION			
Name(s):				
	(Last)	(First)	(Middle)	
Street Address:_				
City:		State:	Zip Code:	
Home Phone:		Cell Phone:		
Email:				
Date of Birth:		Marital Status:	Single Married	Widowed
Home Church:				
Street Address: _				
City:		_ State:	Zip Code:	

1. What is your missions agency?

2. What is your call to missions?



3. Share how you became a Christian.

4. What is your training / experience for your planned ministry?

5. Briefly summarize the nature of your proposed ministry.

6. What duration are you planning to serve? Short term (less than 4 years), long term?



7. What are your specific goals for your first two years?

8. What is your projected annual budget?

9. What is your current level of committed support?

All of the above information is correct to the best of my knowledge. I understand that this application does not secure financial support from Westminster Presbyterian Church.

Signature: _____ Date: _____

Email or mail this application to:

1397 Thompson Bridge Road, Gainesville, GA 30501 Email: missions@wcpca.org