

Date of Submission: _____

INSTRUCTIONS

All applicants must complete Sections A – H.

Applicants under 16 years of age must complete Sections A – H plus have their parent or guardian complete Section I.

Use additional paper if necessary and attach to application.

The MET supports involvement in missions and encourages volunteers to distribute prayer letters to friends within the Met to raise support **with prior instructions and approval from the Missions Committee**. General solicitation of funds from the Met congregation is **not permitted**. The amount of funds received from such solicitations must be disclosed, and that amount collected which is in excess of the financial support need of the individual will be retained by the Met Missions Program and applied to similar projects.

The MET will consider providing personal financial support to help meet funding shortfall. Financial support for short term missions trips is generally made available to full-time students and may also be provided to employed adults where financial need is established.

Please submit the application and attached document(s) by e-mail to bmitton@metbiblechurch.ca, in a sealed envelope to Pastor Brian Mitton, or by mail to Pastor Brian Mitton, 2176 Prince of Wales Drive, Ottawa ON, K2E 0A1. If you have any questions contact Pastor Brian at bmitton@metbiblechurch.ca or 613-238-8182, Ext. 241.

The deadline for support applications is 3 months prior to departure or 1 month prior to required first deposit of funds or application deadline, whichever is earlier.

SECTION A: PERSONAL DATA

Name: (Last) _____ (First) _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Email: _____ Phone: _____ Male: ___ Female: ___

Date of Birth (MM/DD/YYYY): _____

Marital Status: Single Married

Dependents: No Yes Number of Dependents: _____

Spoken Languages: English French Spanish Other(s): _____

SECTION B: MISSIONS OPPORTUNITY

Long-term (over 2 years)

Medium-term (6 months to 2 years)

Short-term (less than 1 month)

Short-term MET-sponsored (usually 1 week)

Agency: _____

Address: _____

Email: _____ Phone: _____

Departure Date (DD/MM/YYYY): _____ Return Date (DD/MM/YYYY): _____

Destination: _____ Agency Contact Name: _____

Briefly describe the mission's purpose and objectives. What does this mission agency do?

Describe your role with the mission. What will you be doing with this mission agency?

Describe your journey in getting to this point. Why did you choose this mission agency?

Please provide the name of the Pastor that has encouraged you along this journey.

SECTION C: SPIRITUAL LIFE

MINISTRY INVOLVEMENT

Date (From-To)	Church	Ministry Service*

*Briefly describe your level of ministry involvement in each of the above churches.

PERSONAL TESTIMONY

Please describe your home and religious background with a summary of when and how you became a Christian.

Have you repented of sin and accepted Jesus as your personal Savior? Yes No

Have you publicly declared your faith and have been baptized? Yes No

Are you a member of a church? Yes No Name of church _____

(The last two requirements are mandatory for Long Term support.)

PERSONAL ATTRIBUTES

Describe your abilities, strengths, natural talents and spiritual gifts.

Describe your experience in personal evangelism.

Describe your present level of devotional life and Bible study.

Describe what the Lord is currently working on in your life.

SECTION D: EMPLOYMENT STATUS

Full-time Part-time Unemployed Student (full-time) Student (part-time)

SECTION E: EDUCATION BACKGROUND

High-school in progress High-school completed

Training in progress Specify: _____

Institution: _____

College Diploma/Degree/Certificate: _____

Institution: _____

University Bachelor Degree: _____

Institution: _____

Graduate (Professional, Master, or Doctorate) Degree: _____

Institution: _____

Other training Specify: _____

SECTION F: FINANCIAL REQUIREMENTS

1. Sources and levels of personal income, and financial support pledged or received from others, must be disclosed at time of application.

2. A detailed monthly budget is required to justify the total monthly support amount. (This is usually provided by the Mission Agency or you can use the sample format in Annex A.)

Required Total Monthly Support: \$ _____

Required Total of Other Costs: \$ _____

Personal Contribution \$ _____

Funds raised to date \$ _____

Monthly Income \$ _____

Income Sources _____

Please list other sources of funds, i.e rental property, investments, benefits, etc.:

Do you currently have personal debt? No Yes \$ _____

If you are employed and going on a short or medium term missions trip kindly answer the following:

(a) Are you taking unpaid vacation to go on this missions trip? _____

(b) Describe why you need financial assistance _____

SECTION G: Attestation

I affirm that the information submitted in this application form is true to the best of my knowledge.

Name _____ (signature) Date: _____

SECTION H: Personal References

REFERENCE 1

Name: (Last) _____ (First) _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Email: _____ Phone: _____

REFERENCE 2

Name: (Last) _____ (First) _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Email: _____ Phone: _____

REFERENCE 3

Name: (Last) _____ (First) _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Email: _____ Phone: _____

SECTION I: Under-16 Required Information

Kindly scan this form into the computer and e-mail to bmitton@metbiblechurch.ca, give it to Pastor Brian Mitton in a sealed envelope or mail it to Pastor Brian Mitton, 2176 Prince of Wales Drive, Ottawa, ON K2E 0A1. If you have any questions, contact Pastor Brian at bmitton@metbiblechurch.ca or call him at Met (613) 238-8182, Ext. 241.

The parent or guardian must complete all areas in this section.

I am the: Parent Guardian

I give my permission for _____ (name of applicant) to participate in the following MET approved Missions Trip _____ (name of trip) from _____ to _____ (dates of trip).

Name: _____ (printed) Phone number: _____

Name: _____ (signature)

ANNEX A: SAMPLE BUDGET PLAN

Required Monthly Support

ITEM	AMOUNT
Rent	\$700
Food	\$500
Cell Phone	\$20
Transportation	\$30
Ministry Expense	\$50
MONTHLY TOTAL	\$1,300

Other One-time Costs

ITEM	AMOUNT
Medical Insurance	\$250
Outgoing Passage	\$1,200
Computer	\$500
MONTHLY TOTAL	\$1,950

Cost Summary

- **Total Annual Cost: \$17,550**
- **Personal Contribution: \$5,000**
- **Funds Raised to Date: \$5,000 (monthly), \$1,000 (one-time gifts)**
- **Funds Short: \$6,550**