## Application for a Presbytery Ministry Partnership with the Synod of Living Waters

Believing that ministry needs are ordinarily identified best by local congregations and/or their presbyteries, the Synod of Living Waters commits to a <u>Presbytery Ministry Partnership</u> model as its primary focus for mission. A <u>Presbytery Ministry Partnership</u> is a voluntary collaboration between two or more presbyteries who covenant with each other and then with the Synod to address common ministry goals or

| Date of Application*Applications may be submitted at any time during the year, but must be received by September 1 in order to be considered for funding for the following budget year beginning January 1. |
|---|
| Name of proposed Presbytery Ministry Partnership  |
| Brief statement of Ministry Need to be addressed or Ministry Goal for this partnership  |
|   |
| Please list current Presbytery Partners (minimum of 2)  |
| 1)  |
| Endorsed by vote of presbytery on   |
| 2)  |
| Endorsed by vote of presbytery on   |
| 3)  |
| Endorsed by vote of presbytery on   |
| 4)  |
| Endorsed by vote of presbytery on   |
| 5)  |
| Endorsed by vote of presbytery on   |
| 6)  |
| Endorsed by vote of presbytery on   |
| 7) Additional Partners:   |
| Name of person/s completing application   |
| For additional information, please contact  |
| @ (address, phone, e-mail)  |

## Application for a Presbytery Ministry Partnership Goals and Objectives of Partnership: Please limit Goals (the end result the PMP hopes/plans to attain) to one or two. Each Goal should be followed by three or four Objectives (defined, measurable ways that will be used to reach the Goal). A separate sheet may be u sed. Goals and Objectives should be no longer than one side of an 8 ½ x 11 sheet. Anticipated Duration of this Presbytery Ministry Partnership: (up to 3 years)\_\_\_\_\_\_ Proposed Budget for Partnership: (attached)\_\_\_\_\_

form.

Resources requested of Synod. Please list in-kind and financial. Be specific. List here as well as on budget

1)\_\_\_\_\_\_

2)\_\_\_\_\_

3)\_\_\_\_\_

Any additional information which may help the Review Committee:

(Every attempt has been made to make this form user friendly! Additional information referencing any particular question may be attached and will surely be considered, but please make every attempt to be clear and succinct.)

Applications do not have to be typed on this form, but must follow this format in order to be reviewed. This form may be emailed to Terry Newland (Terry.Newland@pcusa.org) or submit by mail to the Synod Office at 5016 Spedale Court #399, Spring Hill, TN 37174.