



New Life Assembly of God New Ministry Request

Please complete & submit this form to a member of the Pastoral Staff to request to launch a new ministry at New Life Assembly. The Pastoral Staff will discuss the adoption of the new ministry within scope of the church's mission, budget, & plans for available facilities. You will receive a letter detailing the final decision within 30-60 days of the date of the application submission.

Although we would like to honor each request, please understand that not all ministry requests will fit within the vision of the church & therefore may not be approved. Factors that affect the decision include other pending ministry requests, overlapping similarities among other ministries, & budget constraints.

Name _____ Date _____

Address _____

Email _____ Date of Birth _____

Home Phone _____ Cell Phone _____

Occupation _____ Work Phone _____

Work Address _____

Marital Status Single Married Divorced Remarried

Spouse's Name _____ Date Married _____

Children (Names & Ages): _____

Are you a member of NLA? Yes No Cleared Volunteer? Yes No

Ministry Purpose: Fellowship Outreach Evangelism Worship Discipleship

Explain Purpose in More Detail: _____

Start-up Cost \$ _____ Estimated Annual Budget \$ _____

How does this ministry support the stated vision of New Life Assembly? _____

Plan of Action (limit: one page): Please *attach* a detailed statement including as much information as possible about this new ministry. Explain ministry goals, expected results, church responsibilities, key volunteers & their roles, required training, timeline, budget, funding sources, & available resources.

Received By: _____ Date Received: _____