Ministry Program Development Form

Northeast United Methodist Church

Outreach / Witness

Check One:

Nurture

Specialized Ministry Program:						
Person that will be in charge of new program:						
Contact Information – Phone:						
Ema	Email Address:					
Purpose and description of program, including how this program will help "To Know Jesus and To Make Him Known".						
**Program is for children, youth,	or vulnerab	le adult (see	instructions b	elow): Yes	No	
Program meets (check one): V	Veekly	Monthly	Quarterly	Seasonally	As Neded	
Date(s) of Program:						
Time(s) of Program:						
Location of Program:						
Resources Required:						
Staff (Pastor, office manager, music director)						
Others						
Financing (Budget line item)						
Source of Financing (If other than regular budget)						
Date money is needed (NOTE: A budget request form must be submitted)						
Planned Advertising (include dates/media type)						
**If program is for children, youth or vulnerable adults, volunteers must be approved by a member of the Safe Sanctuary Team. Approved						

Instructions: 1) Form should be filled out as far in advance as possible. 2) Make 3 copies of plan: Put one in the Program Book in Church office, one copy to the Specialized Ministry Coordinator, and keep one copy for yourself.