

Chinese Christian Church of Ottawa (CCCO) – Missions Department

Application for Short Term Mission (STM) Support

The Missions Committee encourages its members to do Short Term Mission in fulfillment of God's Great Commission. It is our responsibility to assist and support those members who are interested in applying for a STM Trip/Project/Activity in accordance with our Missions Policy.

To facilitate the above objective, please complete the information below and submit to the Missions Committee Chairperson for approval at least 60 days prior to the STM departure date. (Note: Any applications submitted less than 60 days prior to the STM departure date may be rejected by the Missions Committee.)

Personal Information

Name (English & Chinese): _____ Gender: _____

Age: _____ Date of Birth (if under 18): _____

Names of parents / legal guardians _____

Address: _____

Phone Numbers _____ Email: _____

Occupation: _____ (Include school year for student)

Christian Experience	
How long have you been attending CCCO?	No. of Years _____ Member _____ Adherent _____
Has accepted Jesus Christ as your personal Savior and Lord?	Yes _____ No _____ Year _____
Baptized at CCCO ____ or at another church ____?	Yes _____ No _____ Year _____
Do you have the support of your parents? (If applicable)	Yes _____ No _____
Do you have the support of your pastor?	Yes _____ No _____
Are you a member of CCCO Youth Group ____, H2O ____, Cell Group ____, Life Group ____, Fellowship Group ____?	Yes _____ No _____
Are you currently serving in CCCO ministries? If yes, please specify A. _____ B. _____	Yes _____ No _____ A. No. of Years _____ B. No. of Years _____

Briefly share your conversion experience or testimony. (i.e. accepted Christ as your Lord and Savior)

STM Service Information

Is this your first STM trip/activity? Previous years you had been to STM.	Yes _____ No _____ Year _____
Have you applied to a Missions organization? If yes, name of organization _____ Address _____ Website _____ Contact Person _____ Phone # _____ Have you been accepted by this Missions organization? Does this organization has a Statement of Faith or Purpose? If yes, include a copy with this Application Form.	Yes _____ No _____ Yes _____ No _____ Yes _____ No _____
Dates of the STM: From _____ to _____ Are the training dates included? If not, specify _____ Location _____	Yes _____ No _____

Explain why you would like to do this STM and what are your expectations.

Describe the type of project/ministries or people-group you will be involved in this STM.
And what knowledge/skills/talents/gifts can you bring to this STM ministry?

Financial Information

What are the total expenses for this STM Trip/Project/Activity? _____
(Include a copy of the Missions Organization's estimated budget if available)

What portion of the total expenses will you be responsible for? _____
How do you plan to raise the balance of the total expenses?
(Indicate if other churches or brothers & sisters outside CCCO will be participating)

What is the financial timeline/schedule that you are required by the Missions organization?

Prayer Information

What are your current or foreseeable challenges to prepare for this STM Trip/Project/Activity?

What are your prayer requests?

Please provide 3 references (at least one reference from outside CCCO)

	Name	Address	Phone	Email
Reference #1				
Reference #2				
Reference #3				

Signature of Applicant _____

Signature of Guardians (if applicable) _____

Date of Application _____