



# MINISTRY SUPPORT FORM

Complete the form below and submit it to the Department Head.

## GENERAL INFORMATION

Name:						
Date:	Service:	Campus:	<input type="checkbox"/> East <input type="checkbox"/> South	<input type="checkbox"/> Cass <input type="checkbox"/> Faith United	<input type="checkbox"/> North <input type="checkbox"/> West	<input type="checkbox"/> Other
Ministry:			Ministry Leader:			

## REQUESTED MINISTRIES

<p><b>Christian Maturity</b></p> <input type="checkbox"/> Triumph University	<p><b>Health And Wellness</b></p> <input type="checkbox"/> Recreation <input type="checkbox"/> Health Education <input type="checkbox"/> Medical Response <input type="checkbox"/> Mental Health <input type="checkbox"/> Nurses <input type="checkbox"/> Triumph Family Counseling	<p><b>Music &amp; Sacred Arts</b></p> <input type="checkbox"/> Band <input type="checkbox"/> Dance <input type="checkbox"/> Mass Choir <input type="checkbox"/> Mime <input type="checkbox"/> New Ensemble <input type="checkbox"/> Theater <input type="checkbox"/> Worship Chorale <input type="checkbox"/> Youthful Praise	<p><b>Worship Support</b></p> <input type="checkbox"/> Adult Ushers <input type="checkbox"/> Hospitality <input type="checkbox"/> Men Ushers <input type="checkbox"/> Parking <input type="checkbox"/> Security <input type="checkbox"/> Spiritual Hands <input type="checkbox"/> Women Ushers <input type="checkbox"/> Youth Ushers
<p><b>Congregational Care</b></p> <input type="checkbox"/> Hospital Visitation <input type="checkbox"/> Intercessory Prayer <input type="checkbox"/> Spiritual Guidance <input type="checkbox"/> Transition of Life	<p><b>IMPACT Youth</b></p> <input type="checkbox"/> ALTARed <input type="checkbox"/> Ascension <input type="checkbox"/> AWANA <input type="checkbox"/> EQUIP <input type="checkbox"/> IMPACT Youth Council <input type="checkbox"/> Mentoring <input type="checkbox"/> Mime <input type="checkbox"/> Nursery (Baby Spot) <input type="checkbox"/> Outreach <input type="checkbox"/> Promiseland <input type="checkbox"/> S.T.E.P. <input type="checkbox"/> Youth Media	<p><b>New Members</b></p> <input type="checkbox"/> Baby Dedication <input type="checkbox"/> Baptism <input type="checkbox"/> Decision Time <input type="checkbox"/> First Impressions	
<p><b>Evangelism &amp; Outreach</b></p> <input type="checkbox"/> Benevolence (Jerusalem) <input type="checkbox"/> Prison (Judea) <input type="checkbox"/> Mission <input type="checkbox"/> No Soul Left Behind (Jerusalem) <input type="checkbox"/> Foreign Mission (Samaria)	<p><b>Media &amp; Communications</b></p> <input type="checkbox"/> Photography <input type="checkbox"/> Publications <input type="checkbox"/> Sound Engineering <input type="checkbox"/> SWK Ministries <input type="checkbox"/> Video/TV	<p><b>Office of the Pastor</b></p> <input type="checkbox"/> Administrative Support <input type="checkbox"/> Diaconate <input type="checkbox"/> Executive Team <input type="checkbox"/> Facilities Support <input type="checkbox"/> Ministers <input type="checkbox"/> Special Projects	
<p><b>Family Life &amp; Empowerment</b></p> <input type="checkbox"/> Business Network <input type="checkbox"/> Family Enrichment <input type="checkbox"/> Financial Empowerment <input type="checkbox"/> Marriage <input type="checkbox"/> Men <input type="checkbox"/> Political Information <input type="checkbox"/> Singles <input type="checkbox"/> Women			

## NOTES

(Specify quantities of staffing and hours of service)