



Broadway Christian Church

## Application for Mission Funding

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Applicant Name: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ (Day) \_\_\_\_\_ (Night)

Home Church: \_\_\_\_\_

Church Address: \_\_\_\_\_

Pastor reference (Please provide name/s and phone number and e-mail address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other references (Please provide name/s and phone number and e-mail address):

\_\_\_\_\_  
\_\_\_\_\_

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Your mission's name: \_\_\_\_\_

Country/State/City where mission is performed:

\_\_\_\_\_

Organization in which your mission is associated (Please provide contact info.):

\_\_\_\_\_  
\_\_\_\_\_

Total estimated cost of mission annually: \$ \_\_\_\_\_

How much funding are you requesting from BCC?

One-Time Gift: \$ \_\_\_\_\_

Monthly: \$ \_\_\_\_\_

Annually: \$ \_\_\_\_\_

Is funding made directly to you or through an organization? \_\_\_\_\_

If through an organization what percentage of funding goes directly to your mission?

\_\_\_\_\_  
\_\_\_\_\_

Do you have any current supporters? \_\_\_\_\_ If so, how many and what is their total commitment?

\_\_\_\_\_  
\_\_\_\_\_

Does your mission have a "cut-off" date or a goal completion time table?

\_\_\_\_\_

If so, please state: \_\_\_\_\_

\_\_\_\_\_

List other ways BCC can partner with

you: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please attach any information about your mission that may assist us in making a decision regarding support for your mission. Please review the following page for a list of qualification for financial support. Thank you for considering a partnership with Broadway Christian Church. Please email application to Tom Cooper at: [tcooper@bccmesa.com](mailto:tcooper@bccmesa.com) or mail it to Broadway Christian Church, c/o "Missions Team" at: 7335 E Broadway Rd, Mesa, AZ 85208

## **BCC Qualifications for Financial Support:**

These qualifications are meant to be used as a guideline by our mission's team. All support for new missions must be approved by the mission's team and obtain final approval from BCC's Board of Elders.

Your mission must:

- 1) Be a Christian organization or individual who is currently a member of a Christian Church.
- 2) Present a financial report estimating expenses and income.
- 3) Present a comprehensive written set of goals and objectives, with strategies on how you would accomplish them.
- 4) Be available to be interviewed in person.
- 5) Agree to supply BCC with a quarterly financial statement and update on meeting your goals and objectives.
- 6) Provide a disclosure of associated organization.
- 7) Disclose the number of sponsors accumulated and estimated sponsors needed.
- 8) Disclose how long the mission work will take and how many years are you committed to it (in years).
- 9) Be able to support BCC mission trips at your location.
- 10) Qualify and be approved annually for additional funding.
- 11) Restoration Church affiliation is preferred.

## **Disqualifications for Financial Support:**

- 1) Applicant fails to submit quarterly financial statements.
- 2) Applicant fails to submit quarterly overview of goals and objectives. (can be in the form of a newsletter, email, etc.)
- 3) Applicant loses contact for an extending period of time.
- 4) Applicant changes mission goals and objectives. (Must re-qualify)
- 5) Applicant is not making progress on goals and objectives.
- 6) Less than 80% of financial support directly goes to the mission field.