

Office Use Only: Partnered with:

Date:

Southeastern Minnesota Synod Partner Congregations

Application to become a Companion Synod Partner Congregation

Congregation Name _____

City/Town _____ Phone _____

Pastor (*responsible for Mission activities*) _____

Email Address _____

Lay Mission Contact Person _____

Address _____ Phone _____

Email address _____

We would prefer a partner from (please circle your preference)

Colombia, S.A.

Central Diocese, Tanzania

Please assign us

Please describe how you think that this partnership will benefit your congregation.

What questions, concerns or challenges do you anticipate when the congregation implements its partnership?

How can the Synod Partner Congregation Task Force assist you in building and strengthening your partnership relationship?

Has this been discussed and approved by you Church Council or Mission committee?

Other comments:

Please Note: The partnering process can take several months. Return completed form to Global Mission Companion Synods Committee Suite 300 1001 14th St NW Rochester, MN 55901 or email: bolin@semnsynod.org

Pastor Signature _____ Date _____

Lay leader signature _____ Date _____