

THE CENTER FOR NEW CHURCH DEVELOPMENT

THE NORTH TEXAS CONFERENCE OF THE UNITED METHODIST CHURCH

APPLICATION FOR APPROVAL OF A NEW DAY OR EMERGENT FAITH COMMUNITY MODEL

District in which Model is located _____

Date in which Model is to start: _____

Name of Model _____

Mailing address _____

The targeted population to be served _____

Describe your Model _____

Has a survey been done to determine potential number of persons? _____

How many persons live in the target area? _____

Does this Model have a potential of at least 25 adults worshiping weekly? _____

Please identify the sponsoring agency (District Committee, local church, or Conference Committee) _____

To whom will the Model submit regular reports? _____

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Share any additional information that will help the Conference Committee make its
decision: _____

Time line:

Date application submitted: _____

Signed _____ Date _____
Director of Center for New Church Development

Signed _____ Date _____
New Day or other Model Leader

Signed _____ Date _____
District Superintendent