

**Central District Conference
Task Group Application**

1. Task Group Name: _____

2. List All Members:

Name: _____
Email: _____
Phone: _____

Name: _____
Email: _____
Phone: _____

Name: _____
Email: _____
Phone: _____

Name: _____
Email: _____
Phone: _____

Name: _____
Email: _____
Phone: _____

Name: _____
Email: _____
Phone: _____

3. Purpose of task group:

4. List measurable goals for the task group:

5. Funding request (if any): (Please provide details and narrative.)

6. Beginning date of task group: _____

7. Signature of task group representative: _____

Please send application to Central District Conference, 1015 Division St, Goshen, IN 46528 or email to office@mcusacdc.org The Missional Church Committee will review and take action on the application. A committee member will be assigned to serve as the link between the committee and task group.

To be completed by conference leadership:

Date application received: _____

Date reviewed by Missional Church Committee: _____

Committee member assigned to task group: _____

May 18, 2010