

APPLICATION FOR CONFERENCE ADVANCE STATUS
HOLSTON CONFERENCE OF THE UNITED METHODIST CHURCH

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All the following information must be supplied for the application to be considered.
If space is limited, attach supplements and number corresponding to question.

1. Name of project or program _____ Phone No. _____

Address: _____

Website: _____

2. Specific purpose of that part of the project/program for which Advance status is requested.

3. Place(s) where the project is administered and/or carried on

Describe facilities: _____

4. How is the project/program administered? (Director, Member of Staff)

5. Is the administrator paid or volunteer? _____ Full or part time? _____

What Staff personnel are available and what are their qualifications?

6. List names of persons on the Board of Directors? (Attach supplement) How are the members elected?

_____ Is there a limit to their term? _____

7. How many ethnic members on the board or staff? Board _____ Staff _____

8. If this is an ecumenical project, list the names, addresses, and church membership of The United Methodists on the governing board.

9. List other sources and amounts of finances:

10. Goal for Advance giving for coming year \$ _____
(Attach copy of the current budget)

Submit to your district superintendent for review and signature.

Signature of District Leadership Council Director _____ Date _____

Signature of District Superintendent _____ Date _____

Return to: The Advance Chairperson, 330 McFee Road, Knoxville, TN 37934