

Application To Be A Malawi Partnership Congregation of Pittsburgh Presbytery

CONGREGATION

Church Name _____

Address _____

Phone (____) _____ Email _____

Pastor(s) _____

Date of Session approval of three year partnership _____

Budget for program _____ Date application was submitted _____

PARTNERSHIP PRIMARY CONTACT PERSON

Name _____

Address _____

Phone (____) _____ Email _____

QUESTIONS TO BE COMPLETED BY SESSION

1. Why we want to be in partnership with a congregation in Malawi?

2. What needs in our congregation do we believe this partnership will meet?

3. What do we expect to learn through our partnership with a sister congregation?

