

**South Carolina United Methodist
Conference Advance Special Ministries
Application for Certification**

Year applying _____

Agency/Institution Information

Date: _____

Name of agency/institution: _____

Mailing address: _____

Physical address: _____

E-mail address: _____

Website: _____

Phone number: _____

Agency/Institution History and Mission

On a separate page, please give a brief history of the agency and a detailed description of the current mission and ministry of the agency. Be sure to include how the agency helps to fulfill the mission of the United Methodist Church (as described in Paragraph 120 of the 2016 Book of Discipline: “The mission of the Church is to make disciples of Jesus Christ for the transformation of the world. Local churches and extension ministries of the Church provide the most significant arenas through which disciple-making occurs.”) and how the agency helps fulfill the mission of the Connectional Ministries of the South Carolina Annual Conference (“to equip and connect local churches in mission and ministry in and beyond the local community”).

Agency/Institution Board and Personnel

On a separate page, please list your Board of Directors. For those who are United Methodist, please include the name of the local church in which they are active members.

Also, please list your paid employees, and include their job titles.

Agency/Institution Financial Information

Please attach copies of:

- 1) The agency’s current year budget
- 2) A financial report showing last year’s income and sources, and last year’s expenditures
- 3) The agency’s most recent financial audit (**application will not be processed without this**)

Agency/Institution Local Church Connections

Please attach a list of local United Methodist churches that are involved with your agency and how they are involved (volunteers, donations, advocacy, etc.)

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Agency/Institution District Approval

We endorse and support this agency and ask that they be certified as a South Carolina United Methodist Conference Advance Special Ministry.

District Superintendent's Signature

Date

DCM Chairperson's Signature

Date

Agency/Institution Signatures

We request certification as a South Carolina United Methodist Conference Advance Special Ministry.

ASM Executive Director's Signature

ASM Executive Director's Phone & Email

Date

ASM Board of Directors Chairperson's Signature

ASM Board of Directors Chairperson's Phone & Email

Date

DEADLINE: July 30

**This application must be in the Connectional Ministries
Office with all required signatures by July 30.**

Please print and mail everything together to:

South Carolina United Methodist Center
Office of Connectional Ministries
4908 Colonial Drive
Columbia, SC 29203