



# Small Team Project (STP) Nomination Form

**Small Team Project Name:** " \_\_\_\_\_ "

**Project Address:** \_\_\_\_\_

**Project Team Leader Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Anticipated Team Size:** \_\_\_\_\_ (#team members)

**Christ UMC Group Represented:** \_\_\_\_\_

<b>Brief Description of Nominated Small Team Project:</b>
<b>Amount of Funds Requested (max \$400):</b>
<b>Anticipated Work Schedule:</b>

**Small Project Team Leader Signature:** \_\_\_\_\_

**Project Nomination Approved** \_\_\_\_\_ **Project Nomination Denied** \_\_\_\_\_

**Christ Missions:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Return Completed Small Team Project Nomination Form to Christ Missions c/o Steve Godby  
Email [stevegodby@christ-umc.org](mailto:stevegodby@christ-umc.org) or hand deliver to Steve Godby  
Got Questions? Call Christ Missions @ 713-447-8066**