



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: _____

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

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 or hand deliver to Steve Godby
Got Questions? Call Christ Missions @ 713-447-8066**