



PennDel Home Missions

Specialized Ministries Application

Thank you for your interest in joining the Specialized Ministries category within PennDel Home Missions. This application will help us understand your ministry's mission, structure, and alignment with the values of this new initiative.

SECTION 1: MINISTRY INFORMATION

- **Ministry Name:** _____
- **Primary Ministry Focus:** _____
(e.g., homeless outreach, marketplace ministry, creative evangelism)
- **Website / Social Media (if applicable):** _____

Location of Ministry:

- **Address:** _____
- **City/Region:** _____
- **Primary Community Served:** _____

Date Ministry Began: ____/____/____

SECTION 2: LEADERSHIP DETAILS

- **Lead Ministry Leader:** _____
 - **AG Credential Held:**
 Yes In Process No
 - **Credential Level:**
 Certified Licensed Ordained
 - **Parent Church or Covering Ministry (if applicable):**

 - **Name of Pastor or Oversight Leader:** _____
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- **Is your ministry under a nonprofit organization or board?**

Yes No

If yes, please list who is on your board:

How often does your board meet? _____

SECTION 3: MINISTRY OVERVIEW

1. **Describe your ministry’s mission and vision.**

How do you uniquely express the Gospel?

2. **What makes your ministry “specialized” or outside of traditional models (church planting, Chi Alpha, chaplaincy)?**

3. **Who are you reaching?**

List the specific population or community your ministry targets.

4. **Share one story or example of life change through your ministry.**

SECTION 4: ALIGNMENT & SUPPORT

5. **How would your ministry benefit from being part of PennDel Specialized Ministries?**

(Check all that apply)

- Spiritual covering
- Access to district resources
- Training opportunities
- Network connection
- Visibility within the PennDel family
- Other: _____

6. **What kind of support, encouragement, or resources would help you grow or multiply your ministry?**

SECTION 5: AGREEMENTS

- I affirm that this ministry is aligned with the mission, values, and doctrines of the Assemblies of God.
- I agree to maintain accountability through my covering church or ministry board.
- I understand that inclusion in the Specialized Ministries category provides recognition and partnership, but not legal or financial oversight.

Signature: _____

Date: ____/____/____

Submit your completed application to:

- **Email:** Sue Garman – sgarman@penndel.org
- **Mail:** PennDel Ministry Network, ATTN: Sue Garman
4651 Westport Drive, Mechanicsburg, PA 17055

Questions?

Contact Tom Rees or Sue Garman at **717.795.5921**