

**Employee Ministry Benefit Application**

**Employee Information**

Name

Title

Department

**Ministry Project Information**

Dates

Organization/Church Name

Location of Service

**Purpose:** What is the purpose of the project?

**Role:** What is your individual ministry role?

If awarded with this benefit, I commit to sharing my ministry experience during InSight Live. Employee Signature/Date

Manager Approval/Date

Please submit this form to [hresources@moody.edu](mailto:hresources@moody.edu)

Ministry Benefit Committee

Determination & Date

**For Administration Only**