

**Lutheran Church of the Ascension
Ministry Event Proposal**

*We come together
to know and to share
the Good News of Jesus Christ*

In order coordinate ministry efforts, and test all events and projects against the congregation's mission statement, all events and projects which require use of the facility, or which will solicit the congregation for goods, services or financial contributions will be reviewed and approved by the Congregation Council. **Please submit six months prior to event.**

All ministry event proposals submitted by an individual will be sent to the appropriate team for review before consideration by Congregation Council

Name of Proposed Ministry Event _____

Date(s) of Ministry Event _____

Coordinator _____
Name Phone Email

Coordinator _____
Name Phone Email

Ministry Event Goal

Describe the proposed Ministry Event:

List the steps needed to bring the Ministry Event to life:

Publicity:

Please refer to the attached "Publicity Plan" on last page and consult with office manager before submitting. Please note: You are responsible for writing your own Witness article and if you do not provide a graphic to be used, one will be chosen for you.

Publicity Plan approved _____ Signature _____ Date _____

The following is needed:

Staff time/expertise _____

Facility use _____

Request for time _____

Request for goods _____

Request for money _____

(If Applicable)

Recipient Agency Name _____

Contact Name _____ Phone _____

Address _____ Email _____

(For individual proposals only)

Proposal has been approved by the _____ team.

Signature _____ Date _____

Congregation Council Action

Date accepted: _____

Date rejected: _____

Comments:

Authorized signature:

**Lutheran Church of the Ascension
Ministry Event Project Summary**

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Please submit no later than 2 weeks after event.

Name of Ministry Event _____

Date(s) of Ministry Event _____

Coordinator(s) _____

Recipient Agency Name _____

Contact Name _____ Phone _____

Address _____ Email _____

Summary of Ministry Event:

Results: (number of volunteers, audience served, goods/money collected)

Evaluation:

Was the stated goal met?

What went well? What could be improved?

Recommendations for the future:

Submitted by _____ Date _____

Received by _____ Date _____

Publicity Plan

Parent Content Source	Deliverable	Plan to Do?	Contact	Due Dates			Ready to Publish	Visibility	
				Yes or No	Draft	Review		Final	Available Date
Child Content	Annual Brochure of Flyer : Google Calendar Events		Ami						
		Pre-Event - Event Name							
		Event Date							
		Event Graphic***		Ami					
		Ascension Flyer**		Shirley K				8/17/2015	9/16/2015
		Web Front Page**		Shirley K				8/17/2015	9/16/2015
		E-board**							
		Witness Monthly mail email**		Ami					
		This Week at Ascension email		Ami					
		Bulletin weekly print		Ami					
Event Graphic **Event Graphic*** Ascension Flyer** Web Front Page** E-board** Witness Monthly mail email** This Week at Ascension email Bulletin weekly print Banner Northfield Banner Church Newspapers (name each) Matronia Event *** (kid-friendly) Paper Mail Letters Post Cards to local community Email Letters to subscribers Facebook Event*** Facebook Post*** Twitter Tweet Event Stakeholder (optional) VolunteerSpot Post Event - Event Name Event Photos Video-Record performance E-board photo display Workshop event photo upload Facebook photos, video upload News articles and photos submit									