



The Society for the Propagation of the Faith Mission Office Department of Parish Vitality and Mission 3525 South Lake Park Avenue Chicago, IL 60653 tel. 312.534.3322 fax 312.534.1599 WeAreMissionary.org

Application Instructions 2022 Missionary Cooperation Plan

To be eligible to share mission stories and invite support from participating parishes of the Archdiocese of Chicago during the months of June, July or August, the following application must be filled out in its entirety. Responses can be typed in the PDF form or handwritten clearly and legibly on a printed copy. Each application **must** include an accompanying letter signed by the appropriate authority (see below). The letter should communicate awareness of the application and introduce the U.S. point of contact. Do not include this cover sheet when submitting the application.

Authority and U.S. Contact

Each missionary institution must identify the appropriate authority, who may be a diocesan bishop, a religious superior, an executive director or board president of a missionary organization. The authority often confers certification for appeal speakers. The U.S. point of contact is responsible for communication throughout the process and submitting all required documentation. S/he must live within the United States and serve as the primary contact for parishes and the Mission Office.

Eligibility for Acceptance

Missionary institutions that maintain a committed presence within the Archdiocese of Chicago are eligible to participate two out of every three years. Missionary causes with no committed presence within the archdiocese are eligible to participate every other year. Eligibility does not guarantee acceptance. The office strives to distribute acceptance as evenly as possible between mission dioceses, congregations of men religious, congregations of women religious and lay organizations.

Payment of Mission Appeal Funds

Before completing the application, please note that to make mission appeals in the Archdiocese of Chicago, it is highly preferred that your missionary institution has a recipient in the United States to whom funds may be sent by check. All appeal checks **must** be cashed or deposited within the United States. If there is legitimate cause, this office can send mission appeal funds by wire transfer with suitable documentation.

Application Deadline:

Tuesday, December 31, 2021 No late applications will be considered.

Send application via:

Email:	missions@archchicago.org
Fax:	312.534.1599
Mail:	Mission Office, Attn: Missionary Cooperation Plan 3525 South Lake Park Avenue, Chicago, IL 60653

Questions?

Contact: Ms. Megan Mio, Mission Appeals Coordinator Email: <u>mmio@archchicago.org</u> Phone: 312.534.3310



Pontifical Mission Societies: Society for the Propagation of the Faith Missionary Childhood Association Society of St. Peter Apostle Pontifical Missionary Union





The Society for the Propagation of the Faith Mission Office Department of Parish Vitality and Mission 3525 South Lake Park Avenue Chicago, IL 60653 tel. 312.534.3322 fax 312.534.1599 WeAreMissionary.org

Application 2022 Missionary Cooperation Plan

Pontifical Missionary Union

Institution Name:	
Institution Type:	 □ Archdiocese, Diocese, Apostolic □ Women's Religious Congregation □ Men's Religious Congregation □ Organization
Country/Countries	Served:
Institutional Inform	
Select Authority:	□ Bishop □ Relig. Superior □ Director □ Other:
Name and Title: _	
	State/Province/Region:
Zip/Postal Code:	Country:
Phone:	Fax:
Valid Email Addre	SS:
Web Address (if a	pplicable):
United States Conta	act:
Name and Title (if	applicable):
Address:	
City/State:	Zip/Postal Code:
Phone:	Fax:
Valid Email Addre	SS:
Society Mission	al Mission Societies: for the Propagation of the Faith ary Childhood Association of St. Peter Apostle



1. Please select the most accurate description(s) of your mission appeal speaker(s).

□ Priest/Bishop □ Deacon □ Religious Sister □ Religious Brother □ Lay Missionary

2. Where are your mission appeal speaker(s) living/ministering? Please select all that apply.

- □ In the Archdiocese of Chicago □ In the United States □ Outside the United States
- 3. In which languages would your institution provide appeals? Please select all that apply.
 - 🗆 English 🛛 Spanish 🔹 Polish 🔅 Other:
- 4. Can your institution produce a video version of the mission appeal message if electronic appeals are necessary?
- 5. Have you applied or been accepted into the Missionary Coop Plan in this archdiocese in the past three years? Please select <u>all that apply</u>.

Applied:
2019 2020 2021 Accepted: 2019 2020 2021

- 6. Does your institution have other relationships with the Archdiocese of Chicago? If so, please explain. (Examples might include members serving through a local parish or Catholic agency, studying at a Catholic institution or other relationships with parishes or diocesan offices. Please be specific.)
- 7. Please describe the general missionary purpose of the institution.
- **8. How and where will mission appeal funds be used?** Please be <u>specific</u> about ministries, projects or programs. Be prepared to offer a report after appeals are complete.