

Mission Cooperation Plan (MCP), Office of the Missions, Diocese of San Diego

Application for 2024

Name of Mission Society or Diocese:		
It is a:	<input type="checkbox"/> (Arch)diocese, <input type="checkbox"/> Vicariate, <input type="checkbox"/> Religious Society or Congregation, <input type="checkbox"/> Other	
Name of the Bishop/Superior:		
Address:		
Phone:		Email:
Name of the US based Contact		
Address:		
Phone:	Cell Phone:	Email:
Name of the speaker:		
Phone:	Cell Phone:	Email:
All speakers must be fluent in English. Specify other languages the speaker can speak.		
<input type="checkbox"/> Spanish, <input type="checkbox"/> Vietnamese, <input type="checkbox"/> Korean, <input type="checkbox"/> Chinese, <input type="checkbox"/> Polish, <input type="checkbox"/> Other		
Web site or social media platform where we can find more information about your mission work, diocese or mission group.		
Please share with us something specific about your project.		
How will the MCP funds be used?		
Have you been included in the MCP of the Diocese of San Diego?		
If yes, indicate the years:		
Have you applied to other Dioceses in California for MCP this year?		
Name:	Signature:	Date: