



To: Individuals and Families Interested in Information Related to  
Long-Term career Missionary Funding through TBC

Listed below are the requirements for all applicants.

1. Be accepted as a mission candidate by a Sending Agency compatible with the TBC Statement of Faith.
2. The sending agency will follow the guidelines listed in the flyer entitled: *Trinity Baptist Church Missionary Ministry Guidelines*
3. Complete the TBC application for funding.
4. Satisfactorily complete Preparation / Readiness Sessions with the Pastor.
5. Be interviewed and approved by the Missions Committee.
6. Be approved by the Church in a scheduled business meeting.

The amount and duration of funding will be determined by the Missions Committee based on need and availability of funds with the approval of the Church. Approved applicants will be reviewed annually by the TBC Missions Committee.

Trinity Baptist Church has historically been known as a Mission-Minded church. It is the prayer of our congregation that God will continue to call many into long-term mission work. God has blessed many members with generous spirits and this is providing a path for willing workers to be in the Lord's service.

Submit completed applications to the TBC office.

Further questions may be addressed to members of the staff and/or the Missions Committee.

Thank you for your desire to serve the Lord wherever he leads you.  
TBC Missions Committee

# Long-Term Mission Support Application

Trinity Baptist Church  
800 Jackson Road, Kerrville, TX 78028

Name (full): \_\_\_\_\_

Current Mailing Address

Street/Apt/PO Box \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Phone: (Cell or Home) \_\_\_\_\_ Email: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Date Married: \_\_\_\_\_

Children's Names and Ages:

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Mission Sending Agency: \_\_\_\_\_

Street/Apt/PO Box \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Phone \_\_\_\_\_ Contact Person \_\_\_\_\_

Please list college level schools attended and degrees received:

\_\_\_\_\_ Degree \_\_\_\_\_

\_\_\_\_\_ Degree \_\_\_\_\_

\_\_\_\_\_ Degree \_\_\_\_\_

Spouse:

\_\_\_\_\_ Degree \_\_\_\_\_

\_\_\_\_\_ Degree \_\_\_\_\_

\_\_\_\_\_ Degree \_\_\_\_\_

Church Membership \_\_\_\_\_

Street/Apt/PO Box \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Phone \_\_\_\_\_ Contact Person \_\_\_\_\_

How many years have you been a member of this church? \_\_\_\_\_

Continue with all post high school church affiliation by name and years of membership:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Answer Questions 1 – 5 on separate pages and attach to application.)

1. Briefly share with us how you and your family came to trust Jesus Christ as Lord and Savior. (list experiences of all family members who have received salvation)
2. Tell us about your call to missions.
3. How do you see the local church involved in your call and support?
4. Tell us about your mission sending group and why you chose to work through them.
5. Have you ever worked through another group? If so, who and why?

(Answer the following on this page.)

6. Where will you be serving and what are the responsibilities? \_\_\_\_\_  
\_\_\_\_\_
7. What is the total amount of monthly support required? \_\_\_\_\_
8. What is the current amount of monthly support committed? \_\_\_\_\_
9. What is the total amount of monthly support requested? \_\_\_\_\_
10. When do you expect to be on the field? \_\_\_\_\_
11. How long will you be serving on this field? \_\_\_\_\_
12. How will you maintain communication with those who are supporting you? \_\_\_\_\_  
\_\_\_\_\_
13. Are you ordained or licensed as a minister? \_\_\_\_\_  
Where \_\_\_\_\_ Date \_\_\_\_\_
14. Do you or your spouse have other licenses or certifications? If so, please list them.  
\_\_\_\_\_  
\_\_\_\_\_

Submission of application to the TBC office does not guarantee selection of applicant(s) for financial support nor indefinite continuation of support funds. If approved, financial support will begin in the month an individual or family arrives on their field. Review of need will be conducted annually by the TBC Missions Committee. If financial support is not used for described ministry purposes, all funds received are to be returned to Trinity Baptist Church Missionaries Fund within a designated period of time as determined by the TBC Missions Committee.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_