

Home Mission Board of the National Baptist Convention USA, Inc.



STUDENT REQUEST FORM FOR THE SUMMER INTERN FELLOWSHIP PROGRAM

Dr. Jerry Young, President

Rev. Leonard O. Griffin, Chair

Rev. Gilbert Pickett, Executive Secretary

Mt. Horeb Baptist Church
109-20 34th Avenue
Corona, NY 11368
516-924-3273

Rev. Samuel W. Hale, Jr., Coordinator

Zion Missionary Baptist Church
1601 East Laurel Street
Springfield, IL 62703
217-528-6113 * 217-528-6115 – Fax

Date of Application _____

Name _____ Social Security # _____

Present Address _____

Street City State Zip Code

Permanent Address _____

Street City State Zip Code

Telephone Number _____ Birthdate _____

Home Church _____ Pastor _____

Church Address _____

Street City State Zip Code

Church Phone _____ Pastor's Phone _____

Convention Affiliations

District _____

State _____

National _____

Note: This completed form is due on the last day of April 2016.

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School Attending _____ Class _____

Major _____ Minor _____

School Address _____

Street City State Zip Code

Ministerial Status:

Licensed
 Ordained

Marital Status:

Single
 Married
 Divorced

Do You:

Smoke? yes no
Drink? yes no
Use Illegal drugs? yes no

Ministerial Skills (Number 1-6 in the order of your strengths)

Preacher Teacher Counselor
 Youth Worker Worship Leader Mission Worker

Other Personal Skills

1. _____
2. _____
3. _____

Church Ministry Experience

Church _____ **Pastor** _____

Church Address _____

Street City State Zip Code

Position _____ From _____ To _____

Reason for Leaving _____

Church _____ **Pastor** _____

Church Address _____

Street City State Zip Code

Position _____ From _____ To _____

Reason for Leaving _____

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Other Work Experience

Employer _____ From _____ To _____
MO/YR MO/YR

Position _____ Salary _____

Reason for Leaving _____

Employer _____ From _____ To _____
MO/YR MO/YR

Position _____ Salary _____

Reason for Leaving _____

Have you been convicted of a Felony in the last five (5) years? ___ Yes ___ No

If Yes – Explain _____

List any physical or mental limitation which might affect your ministry.

List three (3) immediate Goals of your ministry.

- 1.
- 2.
- 3.

List three (3) long-range Goals of your ministry.

- 1.
- 2.
- 3.

What functions do you fulfill in the church you are now serving?

If you were elected as a Home Mission Board Summer Intern, what would you expect out of this experience?

In Case of Emergency Notify:

NAME _____ Relationship _____ Phone _____

Note: If you need more space to fill out any of the questions, please use the back of this page.

Signature _____ Date _____