

## Baptist Missions to Forgotten Peoples .... Post Office Box 37043 Jacksonville, Florida 32239-7043 www.BMFP.org

## Preliminary Questionnaire

## **To The Missionary Volunteer:**

The information received through this questionnaire is only preliminary and will be reviewed by the Administrative Management Team. You Ap Ma

lanage	ement Team be favorable.				D.			
					Date	(mm/dd/yyyy)		
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1	Name in full: (Indicate whet	her Mr Mrs o	r Miss)					
	Spouse's First Name							
	Last	First		Spouse	's First Name_			
2	Present Address: Street							
2	Present Address: Street:							
	City and St	ate:				_ Zip Code:		
	Home Pho		Cell Phone:					
	Email:			Fax	x:			
3	Age: Date of Birth:		Place					
J	Age: Date of Birth: _	(mm/dd/yyyy)	1 1400.	City	State	Country		
4.	Please check: Single	Engaged	Married	Widowe	d			
5.	Have you ever been divorced	?	Has any fo	rmer marriage b	een annulled?			
	If yes, please explain on sepa	rate sheet.	If yes, plea	ase explain on s	eparate sheet.			
6.	If married, give the place and	date of your ma	arriage					
ırist	tian Testimony:							
1115	ium Testimony.							
1.								
	A. Give the approximate date of your conversion.							
	B. Give the approximate date of your baptism.							
2.	Name, Address and Affiliat	ion of the church	h of which you	are a member:				
	(Name)			(Address)				
	Affiliation: Independent	GARB	CBA	SBC	Bible	Other		
3.	Pastor's Name:							
	(Address)		(City & State)		(Zip)	(Phone)		

## **Formal Education:**

1.	Grammar School: High Sc	chool:						
2.	Advanced Training: (Please include all education beyond high school)  Graduate							
	College or University	Dates Attended	Yes No	Degree				
3.	Other specialized training:							
4.	Additional training planned:							
5.	Ordination: Please indicate when a							
6.	Secret service organizations: Are							
Chris	tian Experience:							
1.	State briefly any special accomplis	shments or positions of leade	rship held in your schoo	l or church life.				
2.	Relate briefly the account of your dedication to a life of Christian service.							
3.	What experience in Christian service, if any, have you had as of the date of this application?							
4.	Have you ever led a soul to Christ	? Adults: Yes No	Children: Ye	s No				
5.	1 3 1 3							
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ıll to C	hristian Service:							
1.	Explain why you feel called into n	missionary service.						
2.	To what field & type of ministry h	nave you been called?						
3.	Why do you feel led to apply to Baptist Missions to Forgotten Peoples?							
4.	Have you ever applied to or served If so, give the name and address o		? Yes No					
5.	Have you discussed your call to the	ne mission field with your pas	stor? Yes No					
6.	Will your church give approval fo (If no, please explain)	r you to serve with Baptist M	lissions to Forgotten Peo	oples? Yes No				
	The information in this applicate Formal Application to Baptist I			desire to make				
	Signature		 Date					