APPLICATION FOR MAP (Ministry Apprenticeship Program) MINISTRY RESIDENCY

For Stanley Heights Baptist Church MAP Candidates

I. INTRODUCTION				
Date Full Name				
Marital Status (check one):	☐ Married ☐ Widowed	☐ Engaged ☐ Separated	☐ Single	
Spouse's Name:				
Permanent Address:				
Current Address: (if different)				
Home Phone Number:		Work Phone:		
Mobile Phone Number:		E-mail:		
Mobile Phone Number:				
Children's Name		Age	Date of Birth	
II. HIGH SCHOOL & HIGHE	R EDUCATION			
Dates Name of Institu	ution	Major/Minor	Degree	GPA

III. FINANCIAL OBLIGATIONS

Reason for Leaving:

Please list your current financial obligations.

·		Ü	
Type of Debt	Amount of Debt	Monthly Payment	How Debt will be Retired (i.e. sell and payoff with proceeds, rental of house pay off before going to the field, etc)
House			
Car			
School Loans			
Credit Card			
Credit Card			
residency minist Church will as recommendation IV. WORK EXPE	ry. However, it m sist in developin for vocational ser	ay temporarily dela ig a financial pla	rily disallow you from being approved for thay your training period. Stanley Heights Baptisan to eliminate outstanding debts before the the present.
Employer:			Dates:
Address:			
Phone:		Mana	nger:
Duties:			
Reason for Lea	aving:		
Employer:			Dates:
Address:			
Phone:		Mana	nger:
Duties:			

Employer:		Dates:	
Address:			
Dhone	Managari		
Phone: Duties:	Manager:		
Reason for Leaving:			
V. MINISTRY EXPERIENCE (Please type yo	our answers w	vithin the text box)	
List any voluntary and/or paid ministry experie ministries to neighbors, co-workers, students,	ences that you etc.	ı have had. You may also list per	sonal
-			
What has been your most rewarding ministry of	experience? V	Vhy?	

What has been your most frustrating ministry experience? Why?
Describe a time in your life when you were faced with a difficult authority or boss. How did you handle it? What did you learn from that experience?
A. EVANGELISM
Describe any training, both formal and/or informal, which you have received in evangelism. You may
use the backside of this paper, if necessary.
Describe your weekly routine for witnessing to the lost around you.
Describe the last three opportunities you have had personally to lead someone to the Lord.

B. DISCIPLESHIP

List any experiences where you have discipled ano and what materials (if any) you used. You may use		
How do you personally disciple someone in their sp	iritual walk with the Lord	and service for Him?
VI. SPIRITUAL LIFE		
List up 3-4 names of teachers, authors, pastors, or development, both theologically and practically. Tel		
Do you read the Bible regularly?	Yes	□ No
Do you pray daily?	Yes	☐ No
Do you pray with others on a regular basis? With w	hom? How often?	

Fasting, Journaling, Worshi	ip, Intercession, Reading, Observance of the Lord's D	av, Rest)
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Describe a spiritually challe	nging situation in the last six months. How did you ha	ndle it? What did
Describe a spiritually challe you learn from the situation	enging situation in the last six months. How did you ha ? What should you have done differently, if anything?	ndle it? What did Use Scripture.
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Have you ever sought out professional counseling?		☐ Yes	□No
If yes, very briefly explain the issue(s).			
Have you ever sought out pastoral counseling?		Yes	□ No
Have you has struggles with tobacco, alcohol, illegal drugs, pornography, or sexual behaviors?		☐ Yes	□ No
If yes, briefly explain, please. We will discuss this further in the personal interview.			
Describe any formal or informal theological training you ha	ave had in the	boxes below.	

VII. CHURCH BACKGROUND

Please list the churches you've attended regularly in the past ten years in chronological order beginning with the present.

Name of Church :			Affiliation:
Are You a Member?	☐ Yes	☐ No	How long?
Pastor's Name:			Phone:
Church's Address:			
Name of Church :			Affiliation:
Are You a Member?	☐ Yes	☐ No	How long?
Pastor's Name:			Phone:
Church's Address:			
Name of Church:			Affiliation:
Are You a Member?	Yes	☐ No	How long?
Pastor's Name:			Phone:
Church's Address:			

Have you ever been under church discipline? If yes, please explain below.

VIII. MINISTERIAL SERVICE

Why are you considering vocational ministry?
What are your parents' and/or children's' attitudes toward your desire for vocational ministry?
What range of living conditions have you experienced? (E.g. living in a third world country, living in the inner city, living far from parents and family, etc.)
List any experiences you have had with church planting or other ministries.
Ministry often involves difficult circumstances. Indicate how difficult it will be for you to adapt to the following conditions. Your choices are: 1) – I will find joy in adapting in this area, 2) – I think I can adapt well here, 3) – I will need to work at it, but am confident I can adapt, 4) – I will struggle to adapt, 5) – I won't adapt in this area
Doing deputation Limited Income and financial resources
Enduring separation from friends and loved ones
Working in an isolated community Adjusting to a new and strange area of the country/world
Living in an urban setting Evangelizing alone
Team members who are difficult to love Understanding and connecting with lost people who have different world views
Taking instructions from the pastor-trainer of Stanley Heights Baptist Church Taking instructions from other trainers of Stanley Heights Baptist Church
Learning from the pastor-trainer of Stanley Heights Baptist Church
Learning from other trainers of Stanley Heights Baptist Church Completing the weekly responsibilities of the Missionary Apprenticeship Program

IX. PERSONAL INTERESTS What are your favorite forms of recreation? What active cultural interests (e.g. music, art, literature) and hobbies do you have? If you can, name a favorite book, periodical, and/or website you've read or visited in the last six months. Why is it a favorite? X. MEDICAL HISTORY When was the last time you had a complete physical? ☐ Average ☐ Below Average How do you appraise your health? Excellent If yes, please specify: PERSONAL/FAMILY PHYSICIAN Name of Physician: Address: Telephone Number: Mobile Phone Number: Do you have any medical insurance? Yes □ No If yes, please supply the following information:

Name of Insurance Company:

Address:

Telephone Number:

Mobile Phone Number:

Type of Policy or Coverage:

XI. REFERENCES

Your application is not complete until SHBC receives your references. Please send reference forms to the people you have named below, ask that they be completed and returned to SHBC as soon as possible. Thank you.

Pastor Ref	erence				
Name (incl	ude title):				
Address:					
Phone:		Fax:		E-mail:	
Employer F	Reference				
Name (incl	ude title):				
Address:					
Phone:		Fax:		E-mail:	
Spiritual Mo	entor or Church De	eacon			
Address:					
Phone:		Fax:		E-mail:	
Is this pers	on a professing Chri	stian?	☐ Yes		No
May we co	ntact this person?		☐ Yes		No
Personal R	eference				
Name (incl	ude title):				
Address:					
Phone:		Fax:		E-mail:	
Personal R					
Name (incl	ude title):				
Address:					
Phone:		Fax:		E-mail:	

NOTE: Prior to acceptance, SHBC requires a letter of recommendation from the MAP candidate's home church. <u>Please request this from your local church.</u>

XII. Signature

l affirm that, insofar as I	am aware, the info	rmation on this	application is ac	curate and co	mplete as of
this date.					•

Signature:	Date:		
After you hav	ve completed and signed this application, please send it to the following address:		
	Pastor Brent Baughman		
	Stanley Heights Baptist Church		
	1512 McBrien Road		
	East Ridge, Tennessee 37412-1419.		
If you have questions about the application, or if you have comments which you need to add to this application, you may email us at the address above or write your comments below.			

XIII. BIOGRAPHICAL SKETCH

Write a 1-2 page biographical sketch of your life. Include your personal testimony emphasizing other events in your life which have contributed to making you the person you are today, such as your relationship to your parents.

XIV. MINISTRY BURDEN, VISION, & GOALS

Please, be both broad (big-picture) and precise. We want our training to be personal and useful. There may be things you include on this page that we need to know in order to be more helpful to you and your future ministry. Thank you for all the time you are taking to fill out this application form. We trust it will be time well spent for all involved, but especially for you.