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| **MARKHAM CHINESE BAPTIST CHURCH MISSION BOARD** APPLICATION FOR FINANCIAL SUPPORT **MCBC logoFOR MISSION EDUCATION** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **APPLICANT INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: Click here to enter text. | | | | | | | | | | | | Age: Under 18 | | | | | | | 18-25 | | 26-35 | | 36-55 | | | Over 55 |
| Address: Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone (Home): Click here to enter no. | | | | | | (Cell): Click here to enter no. | | | | | | | | | | | E-mail: Click here to enter text. | | | | | | | | | |
| Gender: Male  Female | | | Marital Status: Choose an item. | | | | | | | | | | | | Have you been baptized? Yes  No | | | | | | | | | | When: MM / YYYY | |
| Current Church Membership: | | | MCBC | | | | | Other Church | | | | | | | | Membership Since: MM / YYYY | | | | | | | | | | |
| How long have you been attending MCBC? | | | | | | | | Click here to enter text. | | | | | | | | Which MCBC congregation do you attend? Choose an item. | | | | | | | | | | |
| Name and Address of Church (if not MCBC): | | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | |
| **EDUCATION / Ministry** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| University / School attending: | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | |
| Previous & Current Service at Church: | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | |
| Spiritual Gifts & Talents: | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | |
| Vision & Burden: | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | |
| **PROGRAM INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Program / Conference / Seminar: (attach details) | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | |
| Organized by: | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Length of Program: | | Click here to enter text. | | | | | | | | | Start Date: | | | Click here to enter a date. | | | | | | End Date: | | Click here to enter a date. | | | | |
| Objectives in attending the program: | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | |
| **FINANCE** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Cost of Program: | | | | | | | | | $Click here to enter amount. | | | | | | | | | | | | | | | | | |
| Amount funded by yourself: | | | | | | | | | $Click here to enter amount. | | | | | | | | | | | | | | | | | |
| Financial Support requested from MCBC: | | | | | | | | | $Click here to enter amount. | | | | | | | | | | | | | | | | | |
| **Recommendation** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*\*\*\*\* LETTER OF RECOMMENDATION REQUIRED \*\*\*\*\* | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signatures** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Pastor: | | | | Signature of Applicant: | | | | | | | | | | | | | | Signature of Counsellor: | | | | | | Date: | | |
|  | | | |  | | | | | | | | | | | | | |  | | | | | | Click here to enter date. | | |
| **FOR OFFICE USE ONLY** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Amount Approved: $Click here to enter amount. | | | | | | | | | | | | | Date of Payment: Click here to enter date. | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | |