CERTIFICATION RENEWAL FORM

Ministerial Financial Assistance for Students Preparing for a Church-Related Vocation

Baptist General Convention of Texas

Pastor or Church Leader and Student,

Each applicant to the Ministerial Financial Assistance program of the Baptist General Convention of Texas (BGCT), must **annually** reaffirm their call to church-related vocational ministry and furnish evidence, by way of written testimony of the pastor (or church leader) of the student’s involvement with, support of, and commitment to a local cooperating BGCT church.

The forms below (**student** and **pastor/church leader**) will provide the necessary evidence.

In providing this evidence, the church commits their support, along with other BGCT churches, to this ministry student.

Thank you for honoring this sacred trust.

*The Theological Education Council, BGCT*

**STUDENT COVENANT**

Whereas *Texas Baptist* churches have committed their cooperative missions funds to providing financial assistance to men and women who are preparing for ministry vocations in the church and,

Whereas *Texas Baptist* universities have committed to providing theological education that prepares students for vocations in church-related ministries and,

Whereas I have sensed the call of God in my life to prepare for a vocation in a church-related ministry (such as pastor, church staff, missionary, chaplain);

I hereby enter into a covenant relationship with the churches of the **Baptist General Convention of Texas** to honor the sacred trust they have placed in me through their financial support and,

Should I come to a point in my understanding of God’s will for my life that I no longer sense a call to a church-related vocation,

I will immediately inform university officials and no longer accept this financial assistance provided by the churches of the Baptist General Convention of Texas.

(Signature) (Date)
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STUDENT INFORMATION SECTION

Name: ____________________________
Email: ____________________________
Name of Church: __________________

Permanent Address:
Street: __________________________
City, State, Zip: __________________
Name of School: __________________

During the preceding academic year I have been involved with, supportive of, and committed to the ministries of this BGCT church in the following ways:

Paid leadership responsibilities:
________________________________________________________
________________________________________________________
________________________________________________________

Volunteer leadership or service:
________________________________________________________
________________________________________________________
________________________________________________________

Other involvement or means of support:
________________________________________________________
________________________________________________________

Sign the following reaffirmation, give this form to your pastor or church leader to complete (pages 3-4), then return the completed forms along with any other materials required by your institution:

I hereby reaffirm my covenant with the churches, my sense of calling to a church-related vocation and my desire to continue to receive the Ministerial Financial Assistance provided by the churches of the Baptist General Convention of Texas; and I promise to remain in compliance with the requirements of the BGCT and this partner institution.

Student’s Signature: ____________________________ Date: __________________
**CHURCH CERTIFICATION SECTION**

(Complete the appropriate sections below)

☐ Statement of Certification:

If the church has not ordained or licensed this student, the following statement must be affirmed by the congregation.

*We hereby certify that* ____________

(name of student)

- is involved with, supportive of, and committed to the ministries of this BGCT church
- has shown evidence of a divine call to church-related vocational ministry
- has shown sincere commitment to a career in church-related ministry
- has demonstrated a Christian life-style
- is the kind of person our church would be comfortable recommending as a minister to serve in a church-related vocational position

☐ This congregation affirmed this student’s involvement in our church as noted on page 2 of the form. This congregational certification has been acted upon by:

(check all that apply)

☐ Ordination of student on ______________________________. (date)

☐ Licensing of student on ______________________________. (date)

☐ Adoption of statement of certification above by congregation on ______________________________. (date)

☐ Adoption of statement of certification above by others (specify below) representing the congregation on ______________________________. (date)

Representing the congregation:

☐ Church Committee
☐ Deacons
☐ Elders or other governing board
☐ Council of church staff members
☐ Other (please describe): __________________________________________

☐ I have talked with this student to discuss (1) the student’s sense of call to church-related vocational ministry and (2) ways that the student might be involved in service at our church.
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☐ I affirm this student’s certification renewal application for Ministerial Financial Assistance.

Pastor’s or Church Leader’s Name (Printed) __________________________________________

Position at Church _______________________________________________________________

Telephone Number _______________________________________________________________

Signature ______________________________________________________________________

Date __________________________________________________________________________

_______________________________________________________________________________

CHURCH INFORMATION SECTION

__________________________________________
Church Name and Address

Name of Church: ___________________________________________________________________

Mailing Address: ___________________________________________________________________

City, State, Zip: ___________________________________________________________________

Denominational Affiliations

Baptist association ____________________________________________ City, State

Baptist state convention ____________________________________________

Baptist affiliations, national ____________________________________________

Signed: _____________________________________       Signed: ___________________________________________

(Pastor or church approved leader if student is pastor)                                               (Church Clerk)

*Forms sent electronically or via fax are NOT ACCEPTED. Please return this form with original signatures to:
Scholarship Services, Truett Theological Seminary Baylor Univ., One Bear Place #97126, Waco TX 76798-7126