

Beacon International Baptist Mission Application Agenda
P.O. Box 5907, Johnson City, TN 37602-5907

The following forms are to be filled out and returned or given to the proper individuals, business or church for completion and return to the Mission Office as soon as possible.

1. Application - Please feel free to use additional paper as needed to answer the questions.
2. Your Doctrinal Statement
3. Three (3) Personal Reference forms - give these to 3 non-family members for completion & have them mail them to Beacon International Baptist Mission Office as soon as possible.
4. Your Pastor's recommendation and church information sheet; Please give this to your Pastor for his completion and have him return to the mission office as soon as possible.

Beacon International Baptist Mission Application

P.O. Box 5907, Johnson City, TN 37602-5907

PLEASE INCLUDE A CURRENT PHOTO

DATE OF APPLICATION _____

NAME _____ SPOUSE'S NAME _____

YOUR SOCIAL SECURITY NUMBER ____-____-_____

SPOUCE'S SOCIAL SECURITY NUMBER ____-____-_____

YOUR DATE OF BIRTH _____ SPOUSE'S DATE OF BIRTH _____

YOUR PLACE OF BIRTH _____ SPOUSE'S PLACE OF BIRTH _____

ADDRESS: _____ CITY _____

STATE _____ ZIP _____

TELEPHONE NUMBER WITH AREA CODE ____-____-_____ CELL ____-____-_____

MARITAL STATUS: Please circle appropriate status:

Single

Married

Divorced

Widowed

Divorced & Remarried

If married, date of marriage _____

CHILDREN'S NAMES (Under 18)

_____ DATE OF BIRTH _____ AGE _____ SEX _____

_____ DATE OF BIRTH _____ AGE _____ SEX _____

_____ DATE OF BIRTH _____ AGE _____ SEX _____

_____ DATE OF BIRTH _____ AGE _____ SEX _____

MEDICAL INFORMATION

1. Do you use alcohol or drugs? _____ Does any member of your immediate family use alcohol or drugs in any form? _____ Have you or your spouse ever been addicted to drugs of any form? _____
2. Do you use tobacco in any form? _____
3. Do you or your immediate family have any physical limitations that you feel the mission needs to know about? _____ If yes, please explain: _____

4. Do you and your spouse agree to have a complete physical prior to your leaving for the field at your own expense? _____

GENERAL INFORMATION

1. Have you or any member of your immediate family ever been convicted, sentenced or jailed for any law violation? _____ If yes, please explain: _____

2. Have you had more than two (2) traffic violations within the past two (2) years? If so please explain: _____

3. Have you ever made application to another mission agency? Yes _____ No _____ If yes, list the agency, explain your service with them, and please give the reason(s) for leaving. _____

SPIRITUAL INFORMATION

1. Briefly describe your salvation experience and please include the date you were saved.

2. Are you called to Preach? _____ To Teach _____ Helps Ministry _____

3. Do you read your Bible daily? _____

4. Do you maintain a regular prayer life? _____

5. Do you personally witness to others, using the Scriptures to attempt to win them to Christ? _____

6. Briefly describe your call into Christian Service and Missions

7. How do you rate your testimony before the following? Check one.

	Blameless	Commendable	Moderate	Ineffective
a. The world	_____	_____	_____	_____
b. The Church	_____	_____	_____	_____
c. Your Family	_____	_____	_____	_____
d. Fellow workers	_____	_____	_____	_____
e. Close friends	_____	_____	_____	_____

8. Are you a member of a local Independent Baptist Church? _____ Name of the Church you are a member of _____

9. Address of your Church _____

10. Phone Number with area code _____

11. Pastor's Name _____

12. Pastor's Address _____

13. Pastor's Phone Number: Home _____ Cell _____

14. How long have you been a member there? _____ What is your ministry involvement there?

15. Is your Pastor supportative of you in your call to missions? _____

16. Is the Church listed going to be your sending Church? _____

17. Are you presently ordained? _____ If not, will your sending Church ordain and commission you? _____

18. Do you believe and teach the following doctrines?

- a. The verbal inspiration of the Scriptures? Yes _____ No _____
- b. The Bible (KJV-Textus Receptus) as the sole authority of faith and practice? Yes _____ No _____
- c. The Genesis account of Creation? Yes _____ No _____
- d. Christ was God manifest in the flesh? Yes _____ No _____
- e. Virgin birth of Jesus Christ? Yes _____ No _____
- f. The necessity of the New Birth for salvation? Yes _____ No _____
- g. Salvation by grace through faith? Yes _____ No _____
- h. Holy Spirits indwelling every born again believer? Yes _____ No _____
- i. Jesus Christ's death for our sins? Yes _____ No _____
- j. Jesus Christ's bodily resurrection? Yes _____ No _____
- k. Believer's Baptism by immersion? Yes _____ No _____
- l. Regenerate church membership? Yes _____ No _____
- m. Resurrection of the redeemed to eternal Heaven and presence of God? Yes _____ No _____
- n. Resurrection of the unredeemed to eternal punishment in everlasting hell fire? Yes _____ No _____
- o. Tithing to your local church? Yes _____ No _____
- p. Establishment and maintenance of local, indigenous churches? Yes _____ No _____

19. Do you practice separation from worldly activities and amusements? Yes _____ No _____

20. Do you believe and practice separation from co-operation with unbelievers who do not hold to the Fundamentals of the faith in ALL AREAS of spiritual activity, whether in the local church, mass rallies or evangelistic campaigns? _____

21. Where do you stand concerning the National Council of Churches & the World Council of Churches?

Favor it _____; Oppose it _____; No position on either _____

22. What is your position regarding the gift of tongues and the gift of prophecy for this age?

23. Do you follow the indigenous church planting policy? _____ If not, explain: _____

24. Will you communicate regularly with churches that support you? _____

25. Do you practice modesty of dress? _____

26. Do you believe in the reality of Satan and demons? _____

27. Please explain in great detail what has God called you to do in Missions?

28. Are you and your entire family willing to attend Missionary Training School? Yes____ No____

Educational Information

-High School _____ Date Graduated _____ Diploma earned _____

-GED _____ Date: _____

-College/University _____ Date attended _____ Diploma/Degree earned _____

-College/University _____ Date attended _____ Diploma/Degree earned _____

-College/University _____ Date attended _____ Diploma/Degree earned _____

-Trade School _____ Date attended _____ Diploma/Degree earned _____

-Bible Institute _____ Date attended _____ Diploma/Degree earned _____

-Specialized Training _____ Date attended _____ Diploma/Degree earned _____

General Information

List civic organizations which you are a member and position you are holding or have held, if any.

List any secret society in which you are a member.

Please list your employment for the past 3 years with length of each and highest position you held:

1. _____ Duration _____

Position held _____

Address of company and phone number: _____

2. _____ Duration _____

Position held _____

Address of company and phone number: _____

3. _____ Duration _____

Position held _____

Address of company and phone number: _____

What do you feel your greatest obstacle will be in missions work?

What do you feel your strongest points will be in mission work?

Please list the approximate amount of indebtedness you now owe and how do you plan to eliminate it:

Have you and your Spouse read the Beacon International Baptist Missionary Handbook? _____

Are you and your wife in complete agreement with the Handbook? _____

I/We have read the BIBM Handbook and are in complete agreement with it and have answered all the questions on this application honestly and to the best of our knowledge and ability.

We agree to use only the King James Bible in study and practice.

Applicant's Signature Date

Spouse's Signature Date

Please prepare a Doctrinal Statement and attach it to the application covering the following:

- The Scriptures
 - Inspiration
 - Finality
 - Authority
- The Trinity - Describe briefly
- Creation
- Salvation
- Eschatology
- What is the *Gospel*?
- What are the ordinances of the New Testament?
 - To whom are they administered?
 - By whom are they administered?
- Describe your position on the local church.
- Who is to be admitted into the fellowship of the local church?
- Separation
 - Personal
 - Ecclesiastical
- Eternal Security
- Baptism
 - Water
 - Spirit
- What is your opinion of modern day "tongues" and "healings"?
- Explain your thoughts on indigenous church planting.
- What are your thoughts on Tithing and Mission giving?

Beacon International Baptist Mission

P.O. Box 5907

Johnson City, TN 37602-5907

Personal Reference from three
people you have known for 2 years

(1 of 3) _____

(MISSIONARY CANDIDATE'S NAME)

CONFIDENTIAL INFORMATION

Dear Friend,

As a result of an application received from the Missionary Candidate named above, your name has been given to us as a personal reference. Please complete the following questionnaire and return it to Beacon International Baptist Mission, P.O. Box 5907, Johnson City, TN 37602-5907 at your earliest convenience.

The information you supply will be held in confidence and will assist us with our evaluation of the candidate.

GENERAL INFORMATION

1. How long have you known the applicant? _____ In what capacity? Please describe your relationship. _____

2. Is the applicant living a consistent Christian life among their peers? _____

3. Would you recommend the applicant for full-time Christian service? _____

4. Do you believe the applicant is qualified for foreign mission service? _____

5. Do you think the applicant might be improperly motivated by :

a. Adventure Yes/No

b. Romanic Yes/No

c. Failure at Home Yes/No

d. An Escape Mechanism Yes/No

PERSONAL CHARACTERISTICS

1. Is there anything in the applicant's personal life (habits or attitude) that should be called to our attention?

2. Do you think his/her immediate family would tend to hinder their ministry in missions?

3. Is there harmony and compatibility between husband and wife? _____

4. Evaluate their background from the stand-point of social training and environment:

a. Outstanding _____ b. Above Average _____ c. Average _____ d. Below Average _____ e. Poor _____

5. What is your impression of the applicant's physical appearance?

a. Extravagant _____ b. Proper _____ c. Untidy _____ d. Slouchy _____

6. Do you consider the applicant's children well behaved and well mannered? _____

7. What is your impression of the applicant's physical condition? _____

SPIRITUAL QUALITIES

1. Describe the applicant's spiritual condition

Deeply Spiritual _____ Above Average _____ Average _____ Weak _____

2. Evaluate the candidate's knowledge of Scripture

Outstanding _____ Well Versed _____ Average _____ Fair _____ Poor _____

3. Is the candidate excited about winning souls?

Burdened _____ Casual _____ Indifferent _____

4. How does the candidate react to criticism?

Victoriously _____ Acceptably _____ Can't handle it _____

5. Do you consider the applicant to be a person of character? _____

6. Is the applicant a complainer and quitter? _____

7. To your knowledge, is the candidate teachable? _____

PRACTICAL CONSIDERATIONS

Please evaluate the applicant with respect to the following traits. Circle the word that best describes the candidate.

1. Compatibility:	Harmonious	Average	Discordant
2. Cooperation:	Excellent	Average	Negative
3. Maturity:	Developed	Average	Immature
4. Ability:	Superior	Average	Limited
5. Tact:	Discreet	Average	Tactless
6. Judgment:	Exceptional	Average	Poor
7. Initiative:	Aggressive	Average	Lazy
8. Patience:	Commendable	Average	Lacking
9. Perseverance:	Strong	Average	Weak

SUMMARY

1. Please indicate your over-all evaluation of the candidate:

- Excellent _____
- Good _____
- Average _____
- Questionable _____

2. We earnestly solicit any additional comments you feel would be pertinent.

Date _____ Your Name _____

Signature _____

Address _____

State _____ Zip Code _____

Phone Number (____) _____ - _____

Beacon International Baptist Mission

P.O. Box 5907

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Personal Reference from three
people you have known for 2 years

(2 of 3) _____

(MISSIONARY CANDIDATE'S NAME)

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2. Cooperation:	Excellent	Average	Negative
3. Maturity:	Developed	Average	Immature
4. Ability:	Superior	Average	Limited
5. Tact:	Discreet	Average	Tactless
6. Judgment:	Exceptional	Average	Poor
7. Initiative:	Aggressive	Average	Lazy
8. Patience:	Commendable	Average	Lacking
9. Perseverance:	Strong	Average	Weak

SUMMARY

1. Please indicate your over-all evaluation of the candidate:

Excellent _____
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Average _____
Questionable _____

2. We earnestly solicit any additional comments you feel would be pertinent.

Date _____ Your Name _____

Signature _____

Address _____

State _____ Zip Code _____

Phone Number (____) _____ - _____

Beacon International Baptist Mission

P.O. Box 5907

Johnson City, TN 37602-5907

Personal Reference from three
people you have known for 2 years

(3 of 3) _____

(MISSIONARY CANDIDATE'S NAME)

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- | | | | |
|-------------------|-------------|---------|------------|
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| 2. Cooperation: | Excellent | Average | Negative |
| 3. Maturity: | Developed | Average | Immature |
| 4. Ability: | Superior | Average | Limited |
| 5. Tact: | Discreet | Average | Tactless |
| 6. Judgment: | Exceptional | Average | Poor |
| 7. Initiative: | Aggressive | Average | Lazy |
| 8. Patience: | Commendable | Average | Lacking |
| 9. Perseverance: | Strong | Average | Weak |

SUMMARY

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Good _____
Average _____
Questionable _____

2. We earnestly solicit any additional comments you feel would be pertinent.

Date _____ Your Name _____

Signature _____

Address _____

State _____ Zip Code _____

Phone Number (____) _____ - _____

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Beacon International Baptist Mission

P.O. Box 5907
Johnson City, TN 37602-5907

Pastor Recommendation for Missionary Applicant

(Applicant's Name)

CONFIDENTIAL INFORMATION

Dear Pastor,

BIBM is a mission organization designed to help the missionary candidate get to the field of his calling as quickly as possible. We are the 3rd part of the triangle (the missionary, the local church and BIBM) in getting him/her to the field. In order for him/her to come with BIBM, there must be a recommendation from you. You and your church will be responsible for their ordination, licensing and commissioning as well as any discipline that might need to be ministered. We will work very close with you and your congregation in helping the candidate to get to the field of service and stay there until they have finished the job God has called them to do. We will need to work together closely and cooperatively in order to accomplish this task. Please feel free to ask any questions concerning any phase of our mission. We ask you, if possible, to sit in on the examination of the candidate once the application is completed and a final review is set.

Personal Information

1. How long has the applicant been a member of your Church? _____
Does the family Tithe? _____
2. What evidence does the applicant give of a call to missionary service? _____

3. Is the applicant's record as a church member satisfactory? _____
Are he and his family faithful to all services? _____
4. Is the applicant consistent in doing personal work and witnessing to the lost? _____

5. Is the applicant's training for missionary service satisfactory to you? _____

6. Are there any family conditions that might hinder the applicant from being an effective missionary? _____ If so, please explain: _____

7. Is the applicant submissive to your authority? _____ Do either he or his wife have a have a problem with their temper? _____
8. Does the applicant take instruction and criticism well? _____
9. Is the applicant teachable? _____ Will they cooperate with other missionaries without jealousy? _____
10. Will you be able to assist in the applicant's support? _____
11. Are you willing to be actively involved in the applicant's ministry as your churches missionary? _____ If not, please explain: _____

