

**Mississippi Baptist Convention Board  
Church Planting Department**



**Church Planting Assessment  
Packet**

## **Five Step Assessment Process For Church Planters Church Planting Department/ Mississippi Baptist Convention**

**Step 1: COMPLETE THE INITIAL INFORMATION FORM & QUESTIONNAIRE**

These forms are to be completed first and a copy of these forms sent (by fax, regular mail, or email) immediately to Scheryl Ng at the address below.

**The original forms are to be returned with this packet.**

**Step 2: COMPLETE THE DISCOVERY TOOL BOOKLET**

Applicant is to complete the Discovery Tools Booklet  
(available in English, Spanish and Vietnamese)

**Please write your name on the front of the booklet and return with this packet.**

**Step 3 COMPLETE THE WRITING OF YOUR LIFE HISTORY**

A guide for writing your life history is enclosed (note the appendix).

**Complete your life history, attach the appendix, and return with this packet.**

**Step 4 COMPLETE CONSENT DOCUMENT FOR BACKGROUND CHECK**

Complete this two page form as accurately as possible.

**This form must be returned with this packet.**

**Step 5 COMPLETE ASSESSMENT INTERVIEW RELEASE AND DISCLAIMER**

Read and complete this one page form printing or typing your name in appropriate place and sign and date it. The interviewer(s) will need to sign this when the assessment is completed. **Please bring this form with you to the assessment.**

**NOTE: Make sure that all your information is in the packet (use the check list). Please print or type except for signatures, and be sure all forms are signed. Place your paperwork in the order of the steps listed. Make copies of everything and keep it on file until the process is complete. When all the information is received, (steps 1-4), you will be contacted to set up an appointment for your assessment interview. Your spouse must be present if married. If you are not contacted within two to three weeks after sending in your assessment packet for your appointment, please contact Scheryl Ng.**

**Return all forms and booklets to:  
Mississippi Baptist Convention Board  
Church Planting Department  
P.O. Box 530  
Jackson, MS 39205**

**Contact for assistance  
Scheryl Ng  
Phone 1-800-748-1651 ext 361  
Fax (601) 714-7438  
e-mail: [sng@mbcb.org](mailto:sng@mbcb.org)**

**Initial Information Form for Pre-Assessment  
Church Planting Department/Mississippi Baptist Convention**

Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ First Name: \_\_\_\_\_

Candidate Preferred Name: \_\_\_\_\_ Spouse Preferred Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone: (     ) \_\_\_\_\_ Evening Phone: (     ) \_\_\_\_\_

Mobile Phone: (     ) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Special Information**

- Yes  No Have you or your spouse ever been divorced or had a marriage annulled?
- Yes  No Have you or your spouse ever been arrested or indicted for a felony?
- Yes  No Do you or your spouse drink alcoholic beverages, use tobacco products, or use illegal drugs?
- Yes  No Do you or your spouse live such a lifestyle that could be an embarrassment to the mission cause?
- Yes  No Are you aware of a health issue that could hinder you from being an effective church planter?
- Yes  No Do you object to having a criminal and credit background check?
- Yes  No Have you or your spouse ever had an experience in glossolalia (speaking in tongues)?

**If you reply “yes” to any of the above items, give an explanation in writing on the reverse side of this page or attach an explanation if more space is needed.**

**Belief and Practice Statement**

- Yes  No Do you agree that the Scriptures are “truth without any mixture of error”?
- Yes  No Do you believe that the miracles and historical events recorded in the Bible actually occurred?
- Yes  No Do you believe that Jesus Christ is the virgin-born Son of God who died for our sins, rose bodily from the grave, and is coming again?
- Yes  No Do you recognize immersion of believers as the scriptural mode of baptism?
- Yes  No Do you agree that the office of pastor is limited to men as qualified by Scripture?
- Yes  No Do you actively engage in personal evangelism?
- Yes  No Do you give regularly (tithe) to your church and encourage others to do so?
- Yes  No Will you lead your church to give to the Cooperative Program?

**If you replied “no” to any of the above items, give an explanation in writing on the reverse side of this page or attach an explanation if more space is needed.**

Signature \_\_\_\_\_ Date \_\_\_\_\_



**CHURCH PLANTER QUESTIONNAIRE**

*Please complete all information requested. If all information requested does not fit in the space allowed, please write the information on the back of the page.*

<b>Applicant's Legal Name</b>	last	first	M.I.
Please provide any other name used for prior employment or school that differs from the above	last	first	M.I.
<b>Current Home Address</b>	street	city	state Zip

Date of birth (month/day/year):	Birth Place:	Social Security Number:
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Name as it appears on Driver's License:
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Driver's License #	State
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**Residential History: list all residential addresses in the last 7 years**

Address	City	State	Zip	From	To

**Education History: List all schools attended**

College, university, or trade school	To	from
City/state	telephone	Degree earned: or Incomplete
Major:	Minor:	

College, university, or trade school	To	from
City/state	telephone	Degree earned: or Incomplete
Major:	Minor:	

College, university, or trade school	To	from
City/state	telephone	Degree earned: or Incomplete
Major:	Minor:	

**Church Planting Department, MBCB  
Church Planter Questionnaire**

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applicant's legal name	last	first	M.I.
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**Religious Employment History: List all ministerial positions held in the last 7 years**

Most Recent Church Name:	Telephone
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May we contact your present employer?    Yes                      No

Address	City	State	Zip	From	To
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Ministry Position	Salary	Reason for Leaving
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2nd Church Name:	Telephone
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Address	City	State	Zip	From	To
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Ministry Position	Salary	Reason for Leaving
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3rd Church Name:	Telephone
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Address	City	State	Zip	From	To
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Ministry Position	Salary	Reason for Leaving
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4th Church Name:	Telephone
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Address	City	State	Zip	From	To
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Ministry Position	Salary	Reason for Leaving
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5th Church Name:	Telephone
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Address	City	State	Zip	From	To
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Ministry Position	Salary	Reason for Leaving
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**Church Planting Department, MBCB**  
**Church Planter Questionnaire**

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applicant's legal name	last	first	M.I.
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<b>Secular Employment History: List all secular jobs held in the last 7 years</b>					
Most Recent Company Name:				Telephone	
<i>May we contact your present employer?</i> Yes                      No					
Address	City	State	Zip	From	To
Job Title	Salary	Reason for Leaving			
2nd Company Name:				Telephone	
Address	City	State	Zip	From	To
Job Title	Salary	Reason for Leaving			
3rd Company Name:				Telephone	
Address	City	State	Zip	From	To
Job Title	Salary	Reason for Leaving			
4th Company Name:				Telephone	
Address	City	State	Zip	From	To
Job Title	Salary	Reason for Leaving			
5th Company Name:				Telephone	
Address	City	State	Zip	From	To
Job Title	Salary	Reason for Leaving			

**Church Planting Department, MBCB  
Church Planter Questionnaire**

applicant's legal name	last	first	M.I.
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**Personal References:**

Please list **3 ministry** related references. Include all contact information: name, address, telephone numbers, and e-mail.

- 1.
- 2.
- 3.

**Personal References:**

Please list **3 non-ministry** related references. Include all contact information: name, address, telephone numbers, and e-mail.

- 1.
- 2.
- 3.

APPLICANT CONSENT: I understand and agree the Church Planting Department, MBCB will verify all or part of the information I have given. I understand that this verification may include any inquiry into my credit history, motor vehicle driving record, criminal and civil records, prior employment (including contacting prior employers), education (degree, GPA and attendance) as well as other public record information. I authorize the release of such information as may be necessary to verify the information I have provided. I release and hold harmless from all liability any individual or entity requesting or supplying information with respect to my application.

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

# **LIFE HISTORY GUIDE**

## **Church Planting Department/Mississippi Baptist Convention**

### **Length**

The Life History should be approximately 5-6 pages, not exceeding 10. Please attach a photo of yourself and/or family.

### **Content**

The Life History must contain your religious experiences. Share about your conversion or salvation experience and your growth as a Christian and your call to Christian service. Tell about your present walk with the Lord and the way that you are now ministering and serving Him.

### **Purpose**

The Life History provides a vehicle for the church planter to reflect on his life and the assessor to become acquainted with the church planter's perception of his life.

### **Nature of the Life History**

Anton Boisen spoke of "living human documents." These are in contrast to other documents, scripture, tradition, church history, creeds, etc. These do not deal only with religious issues, but critical areas of a person's life as well. The Life History is not a resume' but a story.

## **SUGGESTIONS FOR WRITING A LIFE HISTORY**

### **Context of Your Life**

Where were you born and who was your family? What were the religious and social identifications of your family? How have they changed? What has been your education, and how did it change you?

### **Persons in Your Life**

Who have been the three most significant persons in your life and how were they influential? Who is your favorite Biblical character? Who was the most influential minister in your life and who would you like to model your ministry after?

### **Experiences**

What have been the important turning points in your life? Who were the significant people in these turning points? What have been your five best achievements throughout life? (e.g. captain of the Little League team, won a blue ribbon at the 4-H fair, valedictorian, etc.)

### **Outline**

Family Background

Pre-school— influences, vivid memories, significant others

Grade school & middle school— influences, achievements, significant others, religious experiences

High school— influences, achievements, significant others, religious achievements, turning points

College— influences, achievements, significant others, religious achievements, turning points,  
vocational plans

Post College— Influences, achievements, significant others, religious achievements, turning points, jobs,  
crises

## **APPENDIX TO LIFE HISTORY**

In approximately one page, describe your calling to the ministry of church planting. In what ways has God gifted you to serve in a church planting ministry? How did you identify these gifts (e.g. spiritual gifts inventory, affirmation of church body, etc.) and how have you used them?

In one half page or less, describe how you are involved in personal evangelism? Describe your most recent effort to lead someone to a personal conversion experience, giving time, place, and result.

In one half page or less, describe a time where you started something new (does not have to pertain to Christianity) or gathered people together to accomplish a task. What were your responsibilities and what were the results?

# MISSISSIPPI BAPTIST CONVENTION BOARD DISCLOSURE & AUTHORIZATION RELEASE FORM - VOLUNTEER



## DISCLOSURE

As a **volunteer** for the Mississippi Baptist Convention Board, certain consumer reports may be requested from LexisNexis Screening Solutions Inc. ("LexisNexis"). These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, professional credentials, and drugs/alcohol use. Such reports may also contain public record information concerning your driving record, workers' compensation claims, criminal records (both felonies and misdemeanors), etc., from federal, state, and other agencies which maintain such records; as well as information from LexisNexis concerning previous driving record requests made by others from such state agencies and state provided driving records. Furthermore, the Mississippi Baptist Convention Board may obtain information from law enforcement files concerning any history of sex offenses or offenses against children with which you may have been charged or convicted.

You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report by contacting LexisNexis Screening Solutions Inc, P. O. Box 105108, Atlanta, GA 30348-5108, 1-800-845-6004.

## RELEASE

**I AUTHORIZE, WITHOUT RESERVATION, LexisNexis, AND ANY PARTY OR AGENCY CONTACTED BY LexisNexis, TO FURNISH THE ABOVE-MENTIONED INFORMATION.**

LexisNexis is authorized to disclose all information obtained to the Mississippi Baptist Convention Board for the purpose of making a determination as to my eligibility to participate as a volunteer for the Mississippi Baptist Convention Board. This authorization shall remain on file and shall serve as ongoing authorization for the procurement of such consumer reports at any time during my tenure as a volunteer.

By signing below, I certify that I have read and fully understand this release, that prior to signing I was given any opportunity to ask questions and to have those questions answered to my satisfaction, and that I executed this release voluntarily and with the knowledge that the information being released could affect my eligibility to serve as a volunteer for the Mississippi Baptist Convention Board.

PRINTED NAME \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

STREET ADDRESS (NO P.O. BOXES) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT / GUARDIAN SIGNATURE (REQUIRED IF APPLICANT IS UNDER AGE 18) \_\_\_\_\_

**THIS FORM IS FOR VOLUNTEERS WORKING FOR THE MISSISSIPPI BAPTIST CONVENTION BOARD (MBCB).  
THIS FORM CANNOT BE PROCESSED THROUGH THE EXECUTIVE DIRECTOR-TREASURER'S OFFICE OF THE MBCB  
UNLESS WE KNOW THE NAME OF THE DEPARTMENT THAT HAS REQUESTED YOU TO WORK FOR THEM.**

NAME OF MBCB DEPARTMENT REQUESTING INFORMATION: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_

Please send the forms to the department requesting the information at the following address: MISSISSIPPI BAPTIST CONVENTION BOARD  
PO Box 530  
Jackson MS 39205-0530

**VOLUNTEER RELEASE FORM**

**EX 3-2010**

**ASSESSMENT INTERVIEW RELEASE AND DISCLAIMER FORM  
CHURCH PLANTING DEPARTMENT/ MISSISSIPPI BAPTIST CONVENTION BOARD**

The Church Planting Department, Mississippi Baptist Convention, any official representatives or trustee members of the Mississippi Baptist Convention, and the individual interviewer(s) do not guarantee the accuracy of the result, interpretation, or use of the Assessment Interview, or any other testing instruments used in conjunction with the interview for the purpose of screening potential mission pastors/church planters. As such, the Church Planting Department, Mississippi Baptist Convention, and the interviewer(s) accept no liability for the result or effects from the outcome of the Assessment Interview or accompanying testing instruments used.

Name of Candidate: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

I/We have read the above disclaimer and fully understand the implication of said disclaimer.

Consequently, I/We agree to indemnify, hold harmless and release the Church Planting Department, any official representatives or trustees of the Mississippi Baptist Convention and the interviewer(s) from any liability.

Signature of Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_