

# Short-term Missionary Support Application

Trinity Baptist Church  
800 Jackson Road  
Kerrville, TX 78028

## A. PERSONAL INFORMATION:

Date \_\_\_\_\_

1. Name in full: \_\_\_\_\_ Age: \_\_\_\_\_

2. Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email: \_\_\_\_\_

Phone \_\_\_\_\_ Cell phone: \_\_\_\_\_

## B. TBC INVOLVEMENT:

1. How long have you been a member of TBC? \_\_\_\_\_

2. List ministry responsibilities you have held or are holding: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## C. SHORT-TERM MISSION OPPORTUNITY:

1. Sponsoring Agency: \_\_\_\_\_

Mission Field: \_\_\_\_\_

Mission Short-term Position: \_\_\_\_\_

Primary duties of the position: \_\_\_\_\_

Trip Dates: From \_\_\_\_\_ to \_\_\_\_\_

## D. FINANCES

1. Please attach a copy of the budget for your mission trip including contact information for the sponsoring agency if other than TBC.

*(Request will not be considered without this statement of total trip cost per individual.)*

2. My total cost for this trip will be: \$ \_\_\_\_\_ I am requesting \$ \_\_\_\_\_

*(TBC policy allows no more than 50% of total need to be funded per person.)*

3. Date funds are needed: \_\_\_\_\_

4. Funds should be made payable to: \_\_\_\_\_

*(If you have previously applied for and been approved for funds, skip sections E and F but complete section G.)*

