## Mississippi Baptist Singing Churchwomen Pastor / Minister of Music Recommendation Form

(To be completed by the Pastor/Worship Leader/Minister of Music)
Please Print or Type

Date					
				Church:	
serving	in leadership positions on who will:	ssippi Baptis in their loca I lead in wor ally, profess nd support t tatewide ne onships acro	t Singing Il church I ship of Al ionally, a the work I twork of I oss our sto	Churchw music/wo mighty ( nd music of music Christian ate in a u	ically c and worship ministry n peers and mentors unified effort, combining styles of music and worship
	<ul> <li>Help bring N</li> </ul>	lississippi ar	id the wo	rld to Jes	esus
	be as candid as poss Is this applicant a m If not, when	nember of t		•	(Please email <u>smurphy@mbcb.org</u> with any questions serve? yes no ship?
2.	Does this applicant	have a lead	dership r	ole in tl	the music/worship ministry of your church?yesn
<ul><li>3.</li><li>4.</li></ul>	position? yes  This applicant parti List areas and frequ	cipates reg	no Plea ularly in rticipatio	se elabo the mu on:	orate: yes no
5.	She exhibits respec	t for other	adults ar	nd auth	nority figures yes no
6.	•		•		lission Statement of the MS Baptist Singing Churchwomen, <u>to wards</u> to be a part of this ministry?
	1 Not at all	2	3	4	5 Very highly
Explain	any answer which nee	ds elaborati	on or give	e additio	onal comments which may be helpful. (Use the back of this page)
Please o	lescribe any additional	Christian le	adership	this app	olicant demonstrates through the church or in the community.
	ma				Signature

This is a confidential document. The applicant is not to see the completed form. Please return to: MS Baptist Singing Churchwomen, Church Music Department, P O Box 530, Jackson, MS 39205 (Please seal in envelope, sign the envelope, and return to address above.)

Position: \_\_\_\_\_ Phone: \_\_\_\_