



MISSISSIPPI BAPTISTS

RECOMMENDATION FORM

Please use this form to recommend members of Mississippi Baptist churches to the Committee on Nominations for service as a Board Member, Trustee, or Commissioner for the Educational Institutions, Hospitals, Child Care Agency, and other Commissions and Boards of the Mississippi Baptist Convention. **Please use a separate form for each recommendation.**

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone home: _____ Work: _____ Cell: _____

Email address: _____ Birth Date: _____ Sex: M F

Member of: _____ Baptist Church

Church address: _____ Phone: _____

Approximate Sunday School enrollment: 0-250 250-500 500+

Ordained Layperson

Church staff member: Yes Position: _____ Lay person: Yes Occupation: _____

Check the Board you are recommending this person to serve on:

- Board of Ministerial Education
- Baptist Memorial Health Care System, Inc.
- Christian Action Commission, Inc.
- Education Commission
- Blue Mountain Christian University
- Mississippi College
- William Carey University
- Historical Commission
- Baptist Children's Village
- Mississippi Baptist Foundation
- Mississippi Baptist Convention Board

List this person's present or past experience on MBC Boards or Commissions:

What percent of this person's church budget is given through the Cooperative Program? _____ %

What abilities, gifts, and experience does this person have that qualifies him/her for the position recommended?

If a layperson, is he or she active and supportive in their local church?

Recommended by:

Name: _____

Institution/Agency: _____

Address: _____ City: _____ Zip: _____ Phone: _____

It is vital that correct contact information be provided on the person you are recommending. Mail your recommendation to:

Mississippi Baptist Convention Board
Attn: Committee on Nominations – Dr. Shawn Parker
P. O. Box 530
Jackson, MS 39205-0530