

# HARVEST LONG-TERM GLOBAL MISSIONS SUPPORT APPLICATION

This application is for long-term (>13 weeks) ministries that are seeking to be supported by Harvest. For one-time grants and short-term Go trips, please use the short-term applications found online or available at the church office.

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## INTRODUCTION AND INSTRUCTIONS

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We are thankful for your desire to fulfill the Great Commission to go and make disciples of all nations. We will prayerfully consider your request for mission support and will move forward purposefully as God directs. We are excited about the possibility of partnering with you in accomplishing God's Kingdom purposes in your life and ministry and we thank you for filling out this application and letting us know more about you and your ministry.

As you fill out this application, it is important to note how your ministry flows out of partnership with Harvest Bible Chapel and other organizations. All candidates must clearly identify how their mission connects with the primary mission focus areas identified by Harvest as our strategy for global outreach.(Church Planting, Reaching Unreached People Groups, Compassion and Relief, Adoption and Orphan Care, Strategic Evangelism and Discipleship) Furthermore, all candidates for support must be appointed by a missionary agency or organization approved by Harvest Bible Chapel of North Indianapolis. All candidates will need to be prepared for: interviews, reference checks, psychological evaluation, training, doctrinal knowledge evaluation, and any other step deemed beneficial by the Global Discipleship Director or the Missions Leadership Team, in addition to the application. This information is not only to help us evaluate the request, but also to help the applicant personally evaluate the opportunity. More information on missions policy and procedure is available in the Harvest Missions Policy, located online or at the church office.

Any committed support will be for one year (Jan 1-December 31). On-going support will be reviewed each year. Applications for renewal of support must be made by July 31st to be considered for the next calendar year. The application for renewal of support form can be found on our website or obtained through the church office.

Acceptance of support from Harvest Bible Chapel implies a commitment by the missionary not to indiscriminately solicit support from members of the congregation, apart from personal friends and relatives. It also assumes that the missionary will notify the Missions Leadership Team when there is any change in the information provided in this application and that he or she will send regular reports to Harvest as outlined in the Missions Policy.

The Long-term Requests for Support are normally processed in the following manner:

1. Annual requests must normally be received by July 1st. Exceptions to this can be directed to the Global Discipleship Director.
2. A completed long term initial global mission support application will be screened to see if it meets our minimum requirements.
3. If the request meets the minimum requirements, the request is sent to the Mission Leadership Team (MLT) members for them to evaluate the request.
4. If the MLT determines the request to be acceptable, the Global Discipleship Director (GDD) reviews the application. He may conduct a phone or personal interview discussing the specifics of ministry, call, doctrine, and the missions agency.
5. The GDD will then take will take either one of the following action steps: Send a denial letter or gather more information. Part of gathering additional information may be the requestor being invited for an interview with the whole MLT.
6. If the MLT interviews the requestor, they will suggest taking either one of the following action steps: Send a denial letter, request more time to investigate, or suggest a financial support package.
7. If support is recommended, the MLT will send that recommendation to the GDD.
8. If approved by the GDD, support begins according to GDD/MLT determination. Often times the support will coincide with HBCNI fiscal year (January 1 – December 31)

Completed applications can be submitted to the Global Discipleship Director at the church office:

Harvest Bible Chapel North Indianapolis, 9675 E 148th St. STE 200, Noblesville, IN 46060  
admin@harvestnorthindy.org  
phone: 317.773.1336

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PERSONAL INFORMATION

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Note: Please, complete via word processing or type. If married, give complete information for both husband and wife. To indicate which answers pertain to husband and which to wife, precede answer with (H) or (W). If there is any section on the application in which you require more space for you answers, please attach a typed answer to that page and submit with the rest of the application.

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_  N/A  
(Please include spouse's maiden name)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone: (\_\_\_\_) \_\_\_\_\_ Type:  Cell  Home  Work

Secondary Phone: (\_\_\_\_) \_\_\_\_\_ Type:  Cell  Home  Work

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Spouse's Date of Birth: \_\_\_\_\_

Marital Status:  Married Date of Marriage \_\_\_\_\_

Widowed

Not Married

Divorced (If you or your spouse has ever been divorced, please explain circumstances on a separate sheet of paper and attach.)

Dependants:

Child: \_\_\_\_\_ Age: \_\_\_\_\_ Child: \_\_\_\_\_ Age: \_\_\_\_\_

Child: \_\_\_\_\_ Age: \_\_\_\_\_ Child: \_\_\_\_\_ Age: \_\_\_\_\_

Child: \_\_\_\_\_ Age: \_\_\_\_\_ Child: \_\_\_\_\_ Age: \_\_\_\_\_

Other: \_\_\_\_\_ Other: \_\_\_\_\_

Education:

Name of School(s) Beyond High School	Years Attended	Graduated?	Degree/Certificate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Special Training:

Type	Years Attended	Graduation or Certificate
_____	_____	_____
_____	_____	_____

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## GENERAL INFORMATION

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List the significant work experience you have had (including short-term missions experience), beginning with the most recent, going back chronologically, and indicating the years of service of each.

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Describe your relationship to Harvest Bible Chapel North Indianapolis. Please indicate membership, degree of participation in the ministries of the church, and family ties to the church.

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List churches other than HBCNI to which you are related, describing that relationship as above. Please give addresses and the name of a contact person.

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On separate sheet of paper, please explain your salvation experience and how you maintain a vibrant relationship with Christ currently. Please attach to this portion of the application.

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## MINISTRY INFORMATION

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Demographics:

Geographical Area of Service \_\_\_\_\_  
(country, province or state, city or town)

People \_\_\_\_\_  
(name of ethnic group and approximate population)

Current required yearly support \$ \_\_\_\_\_ Support pledged to date \$ \_\_\_\_\_

Breakdown of monthly support:

_____ Salary	_____ Overhead for agency
_____ Medical/Dental Benefits	_____ Ministry Expenses
_____ Retirement	_____ Other: _____

Current Mission Agency/Organization Affiliation:

Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Website: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: (\_\_\_\_) \_\_\_\_\_

Contact E-mail: \_\_\_\_\_ Contact Fax: (\_\_\_\_) \_\_\_\_\_

On a separate sheet of paper, please type answers to the following and submit with this application:

1. Describe the ministry for which you are applying for support. Please include your specific ministry responsibilities (both primary and secondary), length of service, your spiritual giftedness for this ministry and any additional information you would like us to know.
2. What are your specific ministry goals and how will you know when they are obtained?
3. What training, experience, or background will contribute to your ministry assignment?
4. How, in your opinion, does your ministry align itself with the primary focus objectives of the Harvest Missions strategy? (International church planting, reaching unreached/unengaged people groups, compassion and relief, adoption and orphan care, and strategic evangelism and discipleship ministries)
5. How would Harvest members be able to participate in your ongoing ministry?

Do you agree with the HBCNI doctrinal statement?  Yes

No Explain any points of disagreement along with your other answers.

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## REFERENCES

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Note: References are not to be family members.

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

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

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## GENERAL

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If approved for financial support, please indicate how a check should be made out so it will be properly credited to your account.

Payable to: \_\_\_\_\_

Account name or number: \_\_\_\_\_

Mail to: \_\_\_\_\_

\_\_\_\_\_

Please add any other significant information which you feel may be helpful on a separate sheet of paper and attach.

Please return a hard copy of this document, with a photograph (snapshot or digital copy will do) to:

Harvest Bible Chapel North Indianapolis, 9675 E 148th St. STE 200, Noblesville, IN 46060  
phone: 317.773.1336

Please also e-mail a digital copy to [admin@harvestnorthindy.org](mailto:admin@harvestnorthindy.org)