

**Application for Support  
Greater Atlanta Baptist Network  
Updated April 20, 2017**

**1. Please fill out the following information (if this application is not being submitted along with an Application for GABN Membership):**

Name of primary pastor/church planter:

Name of church or church plant (if applicable):

Website Address (if applicable):

Address of church or church plant (if you do not have a church address, please provide your home address):

Email of primary pastor/church planter:

Phone of primary pastor/church planter:

Date church was founded or church plant begun (or expected launch date):

Years primary pastor/church planter has been in ministry:

Years primary pastor/church planter has served as primary pastor of church/church plant (if applicable):

**2. Please provide a brief history of your church or church plant's involvement with the GABN (formerly known as the AASBC).**

**3. Have you or your church/church plant ever received funds from the GABN (formerly the AASBC)? If yes, please describe.**

**4. Description of church or church plant's financial need.**

- a. Type of need (Personal support, administrative, pastoral, facilities, outreach, etc.):**
  
- b. Amount of total projected need:**
  
- c. Amount being requested:**
  
- d. Please attach an itemized budget detailing how the funds will be utilized, including a timeline for use of funds.**
  
- e. If funding is approved, the GABN requires the church/church plant to submit a follow-up report detailing the use of funds. Are you willing to provide this documentation?**
  
  
- f. Please provide any additional information pertinent for the committee's consideration of your application for support.**

**5. Please describe how the fulfillment of this financial request will impact the overall ministry of the church/church plant.**

**6. Please describe how the church/church plant/church planter will meet this need if the GABN is unable provide full or partial funding.**

**7. Please provide a brief philosophy of ministry and your vision for the next 12 months of ministry at your church/church plant.**

**8. Describe your approach to preaching.**

**9. Describe your approach to church membership.**

**10. Describe your approach to church leadership.**

**11. If you are a current member of the GABN, has your church or church plant continued in friendly cooperation with and contribution toward the causes of the Southern Baptist Convention? Do you affirm the Baptist Faith and Message 2000, the doctrinal statement of faith adopted by the GABN?**

**12. If you are a church planter, please provide the following information:**

- a. If applicable, please provide the name of your wife and the names and ages of your children.**
  
  
  
  
  
  
  
  
  
  
- b. If applicable, please provide the name of the institution, degree earned, major/concentration, and date of graduation for each institution of higher education you have attended.**
  
  
  
  
  
  
  
  
  
  
- c. Please summarize your past ministry experience.**

- d. Please provide the name of your sponsoring church.**
  
- e. Have you been through NAMB Mobilize Me?**
  
- f. Have you been through GBC Assessment?**
  
- g. Are you receiving funding from NAMB? GBC? Your sponsoring church? Any other sources? If so, please describe.**
  
  
- h. How long do you anticipate needing funding?**

Printed Name(s): \_\_\_\_\_

Title(s): \_\_\_\_\_

*I acknowledge that I have read the GABN Funding Roadmap.*

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

If you are not a member of the GABN, please ensure this application is attached to your Application for GABN Membership.

Please send your completed application to:

Bryan Pillsbury  
Mount Vernon Baptist Church  
850 Mt. Vernon Hwy NW  
Atlanta, GA 30327

Email: [BryanPillsbury@mvbchurch.org](mailto:BryanPillsbury@mvbchurch.org)  
Phone: 404-255-3133