



**NORTHERN KENTUCKY BAPTIST ASSOCIATION**  
**MISSIONVENTURE**  
**VOLUNTEER ASSISTANCE FORM**

CHURCH REQUESTING \_\_\_\_\_  
VENTURE DESTINATION \_\_\_\_\_  
VENTURE LEADER \_\_\_\_\_  
VENTURE DATES \_\_\_\_\_  
MISSION PARTNER  IMB  NAMB  KBC  OTHER: \_\_\_\_\_

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_  
OCCUPATION \_\_\_\_\_

WHAT IS THE SCOPE OF THIS TRIP (What will your team be doing):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT IS YOUR REQUEST:

DOLLAR AMOUNT: \_\_\_\_\_

PURPOSE:  Team Member's Assistance  
 MissionVenture Supplies  
 Other; \_\_\_\_\_

DATE NEEDED: \_\_\_\_/\_\_\_\_/\_\_\_\_

CHURCH RECOMMENDATION: The \_\_\_\_\_ Church wholeheartedly recommends the applicant to the Northern Kentucky Baptist Association as sound in his/her faith and spiritually equipped to serve/lead and make this request.

Signature of Pastor \_\_\_\_\_ Date Signed \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_  
CHURCH ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_

### CHECKLIST

Please attach the following to your application:

- \_\_\_ 1. Copy of your mission venture's budget
- \_\_\_ 2. List of those team members

#### FOR OFFICE USE ONLY

**Application Received:** \_\_\_\_\_  
(initial and date)

**Approved for Mission Venture:** \_\_\_\_\_  
(initial and date)

**Money Disbursed for Mission Venture:** \_\_\_\_\_  
(initial and date)

**Application Denied:** \_\_\_\_\_  
(initial and date)

**Reason for Denial:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_