



Church Plant Funding Renewal Request

TBC Church Planting Specialist Name: _____

Church Plant Name _____ Planter Name _____

Address _____ City _____ State _____ Zip _____

Day phone () _____ Mobil phone () _____

Email address _____

Last year's Funding Amount \$ _____ Date Begun _____ End Date _____

Full-Time _____ Bi-Vocational _____

Partner Church (Sponsor) _____

ACCOMPLISHMENTS DURING PAST FUNDING YEAR

1. _____
2. _____
3. _____
4. _____
5. _____

PLEASE LIST CHALLENGES YOU HAVE FACED DURING THE FUNDING PERIOD

1. _____
2. _____
3. _____
4. _____
5. _____

PLEASE LIST PLANS/GOALS FOR THE NEXT FUNDING PERIOD

1. _____
2. _____
3. _____
4. _____
5. _____

DESCRIBE YOUR DAILY ACTIVITIES AS A CHURCH PLANTER

1. _____
2. _____
3. _____
4. _____
5. _____

GROWTH OF CONGREGATION DURING FUNDING PERIOD

	Year 1	Year 2	Year 3	Year 4	Year 5
Professions of Faith					
Baptisms					
SS/Small Group					
Worship					
Discipleship					
Worship					

INCOME AND GIVING DURING FUNDING PERIOD

	Year 1	Year 2	Year 3	Year 4	Year 5
Income					
Cooperative Program					
Local Association					
Gifts to GOTM					

Requested Amount from TBC for this year _____

Please attach a copy of your current church budget

Sponsoring Church(s) Recommendation _____ Date _____

Signature _____ Position _____

Associational Director of Missions Recommendation _____ Date _____

Signature _____ Position _____

Return completed form to; Church Planting c/o TBC, P. O. Box 728, Brentwood, TN 37024-0728

800-558-2090 ext 2032

Or email the completed form to your Church Plant Strategist