

FORM 12-Certified Christian Educators Form

As authorized by the Division of Christian Education Accreditation and Credentials
of the Sunday School Publishing Board, National Baptist Convention, USA, Inc.

Applicant must subscribe to the Christian Education *Informer*. Please submit an *Informer* subscription application and fees with this form.

Submit form to: Division of Christian Education ~ P. O. Box 70990 ~ Nashville, TN, 37207-0990

Date ____/____/20____

Personal Information: Name: _____

Address: _____ City _____ State _____ Zip Code _____

Email Address: _____

Phone: Home (____) _____ Daytime (____) _____ Cell (____) _____

Church Information: Name of Church: _____

Address _____ City _____ State _____ Zip Code _____

Pastor's Name: _____

Church Affiliation: _____

District Association

State Convention

Is your church a member of the NBC, USA, Inc.? ____ Yes ____ No Other (List _____)

Current Church Work Experience

Ministry/Auxiliary _____ Position _____

Ministry/Auxiliary _____ Position _____

Other _____ Position _____

Dean of Record: Name: _____

Address: _____ City _____ State _____ Zip Code _____

Phone: Daytime (____) _____ E-mail _____

Christian Education Experience: Have you attended any Christian Leadership Schools? Yes__ No__

How did you become aware of the CCE Program? _____

Recommendation

I am familiar with the Christian character of _____ or have secured information
from someone familiar with him or her. Applicant's Name

Signed Pastor: _____ Date ____/____/20____

Signed Dean of Record: _____ Dean No. _____ Date ____/____/20____

Signed Student: _____ Date ____/____/20____

Please complete this financial section: Appropriate fees must accompany this form. *Do not send cash! Do not staple or tape checks!*

Fees included: Admissions \$ _____ Informer \$ _____ Total \$ _____

Please list the method of payment for this application. Make checks payable to: The Division of Christian Education P. O. Box 70990
Nashville, TN 70990-0990

Check No. _____ Money Order No. _____ Cashier Check No. _____