



Church Statement of Affirmation

Last Name: _____ First Name: _____ MI: _____ Date of Birth: _____

Applicant Email: _____ Applicant Phone Number: _____

Return Instructions

**For Applicants: 1. Check the box of the program you are pursuing.
2. If document is returned to you, upload a scan/photo of the document to your application portal, or fax/mail.**

For Churches: Please either return the form to the applicant, or fax/mail the completed form to the location selected by the applicant.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Leavell College
Leavell College Admissions
P.O. Box 285
3939 Gentilly Blvd.
New Orleans, LA 70126
Fax: 504.816.8453
leavelladmissions@nobts.edu | <input type="checkbox"/> Graduate Program
NOBTS Grad Admissions
P.O. Box 285
3939 Gentilly Blvd.
New Orleans, LA 70126
Fax: 504.816.8453
gradadmissions@nobts.edu | <input type="checkbox"/> Professional Doctorate
NOBTS ProDoc Admissions
P.O. Box 220
3939 Gentilly Blvd.
New Orleans, LA 70126
Fax: 504.816.8170
prodocasst@nobts.edu | <input type="checkbox"/> Research Doctorate
NOBTS ReDoc Admissions
P.O. Box 286
3939 Gentilly Blvd.
New Orleans, LA 70126
Fax: 504.816.8039
phd@nobts.edu |
|---|--|--|--|

Instructions for Church Officials

The purpose of this form is to give evidence that the above applicant is a member in good standing with a local body of believers and that this body affirms both the applicant's desire for theological training and call to ministry. Because churches have differing governmental procedures, church officials must determine how best to represent the church's affirmation of the applicant. At minimum, the signatures of three church officials are required on this document. Alternatively, church officials may choose to discuss and/or vote on this matter in an open forum or business meeting.

Church Name _____ City/State _____

Denomination _____

Please Note: A church is Southern Baptist if it meets the criteria set out in Article III. Composition of the SBC Constitution.

Is the applicant a current member of your church? Yes No

Date applicant became a member of your church (m/y) _____

Church Affirmation

Having evidence that the above applicant to Leavell College/NOBTS is an individual who

- is committed to Jesus Christ
- evidences a call to ministry
- has a high degree of moral integrity
- is emotionally stable so as to be able to fill leadership responsibilities in church life
- shows capacity for theological and ministerial study

we recommend the applicant for admission into Leavell College/NOBTS and pledge our prayerful support during this time of training.

If Affirmed by Church Officials (Two required):

Signature _____ Printed Name _____ Title/Role _____ Date _____

Signature _____ Printed Name _____ Title/Role _____ Date _____

If Affirmed by Vote:

Meeting Moderator

Signature _____ Printed Name _____ Title/Role _____ Date _____

Meeting Clerk/Secretary

Signature _____ Printed Name _____ Title/Role _____ Date _____