



CHRISTIAN COMFORTING MINISTRIES

Application for Educational Assistance (Annual) to Undergraduate / Vocational Education

CE

Reg. Dt.

Eligibility : Full time Pastors, Evangelists, Missionaries, Theology Students (minimum 5 years in Ministry) and their children only

a. Pl fill the form completely b ## Where space is insufficient pl use the page overleaf or additional sheets.

1. Name of the Missionary / Pastor / Evangelist :
2. Date of Birth / Age :
3. Name of the Mission/ Church :
4. Designation & years of Service in Mission / Church :
5. Annual Income : Rs.
6. Contact Address with PIN code##:
7. Phone No. : email id. :
8. Name of the Student :
9. Date of Birth / Age :
10. Phone No. of the student (if any) : email id. :
11. Name of the Course and Duration:
12. Type of Education(encircle the appropriate one): Full Time / Part Time / Distance Education
13. Year of Study (encircle the appropriate one) : I / II / III / IV / V
14. Name of the Educational Institution :
15. Address of the Educational Institution with PINcode ## :
16. Fee details for the Current Academic Year : Rs.
17. Details of CCM Educational Assistance taken by the student in the earlier years :
CCM No. CCM-CE –
Amount received I Year Rs. II Year Rs. III Year Rs. IV Year Rs.
18. Details of CCM Educational Assistance taken by any other member of the family :
CCM No. CCM-CE –
Total Amount received Rs.
19. Details of any other CCM Assistance received by the family : CCM No. Rs.
20. Name of A/c Holder as in Bank Passbook ## A/c No.
21. Name of Bank ## : Name of Branch : IFS Code :
Place : Signature of Student :
Date : Signature of Full Timer



Enclosures () { Verify attachments and place a tick mark inside the brackets }

1. () Passport size Photograph of the Student pinned at top right
2. () Xerox copies of mark list /grade sheet of **all exams** conducted till now, from 10 th std. onwards
Note : Only students with minimum marks stipulated for each course (as per CCM norms in website) will be eligible to apply. Assistance will be continued for the subsequent years against a **similar fresh** application every year, provided there are **no history of arrears** in any exam
3. () Admission Card / Bonafide Student Certificate of the Educational institution
4. () Fee Structure of Institution / Xerox copy of receipt for fees paid
5. () Xerox copy of FIRST page of Bank Passbook. Account must be currently operative
6. () Write up by the Full Timer (1 page) with regard to **Details of life /witness/ service** (see Guidelines attached).
7. () **Testimony** of the student including salvation experience (maximum one page)

Recommendations

- 8a () For Missions **known to CCM** : Recommendations by CEO in **Annexure 1a (or)**
- 8b () For Independent Pastors / Evangelists / Missions **not known to CCM** : Recommendations from two local Christian Leaders **known to CCM** in **Annexure 1b**
- 9 () Prayer / Financial support to CCM (**Annexure - 2**)

Recommending Authority - CEO or two Local Christian Leaders - to pl send the complete Application with ALL enclosures to the CCM address below.

CHRISTIAN COMFORTING MINISTRIES, 9A, Sixth Main Road, Dhandeeswarar Nagar, Velachery, Chennai – 600 042.

Phone: 044 - 2243 1589

email : comfortccm@gmail.com

website : www.christiancomfortingministries.com

Draft : 12.06.2019



CHRISTIAN COMFORTING MINISTRIES

Annexure 1a to Application for Educational Assistance (Annual) to Undergraduate / Vocational Education

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RECOMMENDATION BY CEO OF MISSION KNOWN TO CCM

1. Name of the Missionary :
2. Name of your Organization / Mission :
3. Date of Joining of the Missionary in your Organization / Mission :
4. Is he/she a full time worker on your regular pay roll: Yes / No
5. Brief outline of Missionary done in your Organization / Mission during the last three years. Include more rows if necessary **##** .

Sl. No.	Period		Designation	Ministry Done	Place
	From (Year)	To (Year)			

6. Date of your last meeting with this Missionary :
7. Your Assessment of present status of support provided to the Missionary **##**
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - d . Any other(Pl specify) :
8. Your recommendation on comforting steps to be taken by CCM for this Missionary **##**:
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - c . Any other (Pl specify) :

Name & Designation :

Complete Postal address of your organization :

Phone No. and email id :

Signature, date and seal :

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CHRISTIAN COMFORTING MINISTRIES

Annexure 1b to Application for Educational Assistance (Annual) to Undergraduate / Vocational Education

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Eligibility : Full time Pastors, Evangelists, Missionaries / Theology Students (minimum 5 years in Ministry) and their children only

- a. Pl fill the form completely b. ## Where space is insufficient pl use the page overleaf or additional sheets.
c. # For applicants **not known** to CCM, recommendations by **two** local Christian leaders **known to CCM** to be provided. **Should have known the Full Timer for 5 years or more**

RECOMMENDATION BY CHRISTIAN LEADER KNOWN TO CCM

1. Name of the Pastor/ Evangelist / Missionary :
2. No. of years the Pastor/ Evangelist /Missionary is known to you :
3. Nature of your connection with the Pastor/Evangelist / Missionary :
4. Date of your last meeting with the Pastor/Evangelist / Missionary :
5. Brief outline of the Ministry of the Pastor /Evangelist/Missionary during the last five years. Include more rows if necessary ## .

Sl. No.	Period		Designation	Ministry Done	Place
	From (Year)	To (Year)			

6. Your Assessment of present status of support provided to the Pastor/Evangelist / Missionary ##
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - d . Any other(Pl specify) :
7. Your recommendation on comforting steps to be taken by CCM for the /Pastor/ Evangelist Missionary ##:
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - c . Any other (Pl specify) :

Name :

Complete Postal address :

Phone No. and email id :

Signature, date and seal :

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CHRISTIAN COMFORTING MINISTRIES

Annexure 2 to Application for Educational Assistance
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Parents

Full time Pastors, Evangelists, Missionaries

Declaration regarding providing regular prayer support to CCM and its Comfortees by Parents

We as individuals / as a family / as a Prayer Group will be happy to **pray for CCM** and its **Comfortees** regularly.

Pl send Monthly Prayer Circular. (tick your preference)

1. **Language** Tamil English Tamil and English

2. **Through** Email WhatsApp Hard Copy by post

email id

WhatsApp Mobile No.

Postal Address with PIN code

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If you have filled the Annexure 2 earlier :

Are you getting the Prayer Circular / Prayer Points regularly? Yes / No

Are you able to pray regularly for CCM and its comfortees? Yes / No

Signature with date

Name

STUDENT

Declaration regarding providing regular prayer and financial support to CCM and its Comfortees by Student

I will be happy to **pray for CCM** and its **Comfortees** regularly.

Also when I am employed, I will be happy to **financially support / partner with CCM**, as the Lord enables.

Pl send Monthly Prayer Circular. (tick your preference)

1. **Language** Tamil English Tamil and English

2. **Through** Email WhatsApp Hard Copy by post

email id

WhatsApp Mobile No.

Postal Address with PIN code

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If you have filled the Annexure 2 earlier :

Are you getting the Prayer Circular / Prayer Points regularly? Yes / No

Are you able to pray regularly for CCM and its comfortees? Yes / No

Signature with date

Name

Recommending Authority - CEO or two Local Christian Leaders - to pl send the complete Application with ALL enclosures to the CCM address below.



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Guidelines for giving details of Life / Testimony / Ministry

Details of Life / Testimony / Ministry of Full Time Pastors / Evangelists / Missionaries (maximum one page)

Give details for each period (e.g.) 1993-2003 Schooling 1-10 Std, Name of School, Place

1. Date of Birth, Place of Birth, Name of Parents
2. Education : School, College, Bible College, Other Training
3. Secular Work Experience (if any)
4. Salvation Experience
5. Call to Full Time Ministry
6. Details of Full Time Ministry
Year, Place, Details (What ministry, How many reached with Gospel)
7. Family : Date of Marriage, Details of Spouse, Children
(Name, Age, Male / Female, Present Occupation, Relationship with the Full Timer)
8. Please add Name, Signature and Date

கிறிஸ்தவ ஆறுதல் ஊழியங்கள்

சென்னை - 600 042

முழுநேரத் திருப்பணியாளர்களின் சாட்சி / வாழ்க்கை / ஊழிய விவரங்கள்
(ஒரு பக்கம் மட்டும்)

ஒவ்வொரு காலக்கட்டத்திற்கும் விவரம் கொடுக்கவும். (உ.ம்.) 1993-2003 கல்வி 1 முதல் 10ஆம் வகுப்பு, பள்ளி, ஊர்.

1. பிறந்த தேதி, ஊர், பெற்றோர் பெயர்
2. படிப்பு : பள்ளி, கல்லூரி, வேதாகமக் கல்லூரி, ஏனைய பயிற்சி
3. உலகப் பிரகாரமான பணி அனுபவம் (இருந்தால்)
4. இரட்சிப்பின் அனுபவம்
5. முழுநேரத் திருப்பணிக்கு அழைப்பு
6. முழுநேரத் திருப்பணி விவரம்
ஆண்டு, இடம், விவரம் (என்ன திருப்பணி, சுமார் எத்தனை நபர்களுக்கு நற்செய்தி அறிவிக்கப்பட்டது)
7. குடும்பம் : திருமண நாள், கணவர்/ மனைவி, குழந்தைகள் விவரம்
(பெயர், வயது, ஆண் / பெண், இன்றைய பணி, முழுநேரத் திருப்பணியாளரின் உறவு முறை விவரம்)
8. பெயர், கையொப்பம் தேதி.

Recommending Authority - CEO or two Local Christian Leaders - to pl send the complete Application with ALL enclosures to the CCM address below.