



CHRISTIAN COMFORTING MINISTRIES

Application for Educational Assistance (Annual) for Theological Studies*

CE/TS

Reg. Dt.

* **Eligibility : in a few selected institutions**

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

1. Name of the Student :
2. Date of Birth :
3. Contact Address **##** :
4. Phone No. of the Student :
Email id. :
5. Name of the Church where Student is a member :
6. Years of Membership :
7. Annual Income of the Parent :
8. Name of the Course and Duration :
9. Type of Education (encircle appropriate one) : Full Time / Part Time / Distance Education
10. Year of Study (encircle appropriate one) : **I / II / III / IV / V**
11. Name of the Educational Institution :
12. Address of the Educational Institution with PIN code **##** :



13. Fee details for the Current Academic Year :
14. Details of CCM Educational Assistance offered to the Student in the earlier years :
CCM No. CCM-CE –
Amount received I Year Rs. II Year Rs. III Year Rs. IV Year Rs.
15. Details of CCM Educational Assistance offered to any other member of the family :
CCM No. CCM-CE –
Total Amount received Rs.
16. Details of any other CCM Assistance offered to the family : CCM No. Rs.
17. Details of Bank Account of the Student (or) Parent **##**
 - a) Name as in Passbook & A/c No. :
 - b) Name of the Bank, Branch & IFS Code :

Place : Signature of Student :
Date : Signature of Parent :

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 for **all exams from X Standard onwards** (Only students with minimum 50% marks in all exams from X standard onwards with **no history of arrears** are eligible to apply)
3. () Admission Card / Bonafide Student Certificate of the Educational institution
4. () Institution's Fee Structure Notice / Xerox copy of Receipt for Fees paid
5. () Xerox copy of FIRST page of bank pass book
6. () Testimony, Call to Ministry and Report of the Ministry involved in (see **Guidelines** attached)
7. () Recommendation by the Principal of the institution in **Annexure 1 a**
8. () Recommendation by the Pastor of the Church where the Student is a Member in **Annexure 1 b**
9. () Declaration regarding providing regular prayer support to CCM and its Comfortees by Student and Parents as per **Annexure 2**

Kindly send the complete Application with ALL enclosures to the address below

CHRISTIAN COMFORTING MINISTRIES, 22(Old 9A), Sixth Main Road, Dhaneeswarar Nagar, Velachery, Chennai – 600 042.

Phone: 044 - 2243 1589

email : comfortccm@gmail.com

website : www.christiancomfortingministries.com

14.09.2019



CHRISTIAN COMFORTING MINISTRIES

Annexure to Application for Educational Assistance (Annual)
for Theological Studies

CE/TS

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RECOMMENDATION by PRINCIPAL

1. Name of the Student
2. Your Assessment about the Financial need for the Student
3. Your Assessment about the academic excellence of the Student
4. Your Assessment about the present status of support provided to the Student
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - d . Any other(Please specify) :
5. Your recommendation on comforting steps to be taken by CCM for this Student:
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - d . Any other (Please specify) :

Name :

Designation :

Name & Address of
the Institution :

Phone No. & Email id :

Signature & date :

Seal of the Institution :

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RECOMMENDATION by PASTOR OF THE CHURCH where the Student is a Member

1. Name of the Student
2. Student's Membership Number in the Church
3. No. of years of membership of the Student, in the Church
4. Your Assessment about the Student's involvement in the Ministry of your Church / other Ministries
5. Your Assessment about the present status of support provided to the Student
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - d . Any other(Please specify) :
6. Your recommendation on comforting steps to be taken by CCM for this Student:
 - a . Emotional :
 - b . Spiritual :
 - c . Financial :
 - d . Any other (Please specify) :

Name :

Designation :

Name & Address of
the Church :

Phone No. & Email id :

Signature & date :

Seal of the Church :

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CHRISTIAN COMFORTING MINISTRIES

Annexure 2 to Application for Educational Assistance (Annual) to Undergraduate / Vocational Education

CE/TS
Reg. Dt.

PARENTS

Declaration regarding offering regular prayer support to CCM Comfortees and CCM by Parents

We as individuals / as a family / as a Prayer Group will be happy to **pray for CCM Comfortees and CCM** 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 offering regular prayer and financial support to CCM Comfortees and CCM by Student

I will be happy to **pray for CCM Comfortees and CCM** 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

Kindly send the complete Application with ALL enclosures to the address below



CHRISTIAN COMFORTING MINISTRIES

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

Guidelines

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Guidelines for giving details of Testimony, Call to Ministry and Ministry involved in

**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.

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