

Gordon-Conwell Theological Seminary



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POTENTIAL SUPPORTING TEAM MEMBERS

Student Name: _____

Name	Relationship (i.e. family, friend, pastor, colleague)	Number of Years You Have Known Him/Her
1		
2		
3		
4		
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23		
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25		

Potential Church(es)

Name	Years of Involvement
1	
2	
3	

* Please note that we request this information as a means by which the committee can determine the existing extent of your current ministry network. It is not a means by which the committee will determine potential for financial support through the supporting network. Awards will be granted by assessing a wide variety of qualifications (including, but not limited to: ministry experience, spiritual maturity, faithfulness to the Church, academic promise, strength of references, and communication ability).