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**CMD Enrolment Form**

This form is for church pastors who wish to engage with the Baptists Together scheme for Continuing Ministerial Development but who are either *regionally* recognised or not formally accredited or recognised at all by the wider Baptist family. It is taken from Appendix 8 of the CMD handbook, but is presented here as a Word document on its own that may be filled in as required.

The form asks for the pastor’s details so that can be identified on the BUGB database and requires them to seek endorsement from their regional association. Once completed, it is sent to the Ministries Team.

Baptist Union of Great Britain, PO Box 44, 129 Broadway, Didcot, Oxon OX11 8RT

Tel: 01235 517700 Email: ministries@baptist.org.uk Website: [www.baptist.org.uk](http://www.baptist.org.uk/)

 BUGB operates as a charitable incorporated organisation (CIO) with registered Charity Number: 1181392

**CMD enrolment form**

Taken from the CMD handbook, Appendix 8

**This form is ONLY FOR church pastors wishing to enrol for CMD who are either *regionally* recognised by their association, or who are not formally accredited or recognised by either BUGB or their association.** Anyone who is a BUGB accredited minister, a newly accredited minister, or a nationally recognised pastor/pioneer does not need to complete this form, but can enrol for CMD simply by sending an email requesting enrolment to cmd@baptist.org.uk

**Applicant’s details**

**Surname: Other names:**

**Address:**

**Telephone: Mobile:**

**Email**

**Church: Role in church:**

**Regional association:**

**Data Protection**

I consent to the personal information that I have provided being processed in accordance with the BUGB Data Protection Policy, as explained in the [**BUGB Privacy Statement**](https://www.baptist.org.uk/Articles/369731/BUGB_PRIVACY_STATEMENT.aspx) and in particular the information provided in respect of the work of the[**Ministries Team**](https://www.baptist.org.uk/Publisher/File.aspx?ID=209748&view=browser). I understand that in the event of me withdrawing my consent my application will not be processed any further.

Yes

**Print or sign name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Association affirmation**

I confirm the candidate is in good standing with their local association and that the association will support their CMD:

**Regional Minister print or sign name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please return the completed form to** **cmd@baptist.org.uk**