South Carolina Baptist Congress of Christian Education
Office of the Dean

CONFIRMATION OF AVAILABILITY FORM

Directions: Please place a checkmark in the box that signifies your confirmation of availability to serve as an instructor in the Annual Session of the SC Baptist Congress of Christian Education held the second week in July. **Please note that assignments are made for one year and submission of this form does not guarantee a faculty position, in that the final decision is made by the Dean's Office.** This form must be returned to the Dean's Office. Please email to: **pastormoh@yahoo.com** For any questions please contact **864.554.5084**

☐ I am willing to meet the requirements necessary to be a part of the faculty and I would like for my name to be put in the pool of instructors for the Annual Session of the SC Baptist Congress of Christian Education held on July 12-16, 2027.

☐ I regret that I will not be able to serve as a faculty member at the Annual Congress Session.

In the previous year's Annual Congress Session I served as:

☐	Dean's Staff Personnel	☐	Assistant Instructor
☐	Coordinator	☐	Hall Monitor
☐	Co-Coordinator	☐	Musician
☐	Instructor		

Printed Name: _____

Address: _____

Phone: _____

Email: _____

Church Name: _____

Pastor Name: _____

Department: _____

Division: _____

Course #_____Course Title _____

_____ _____

Signature Date

South Carolina Baptist Congress of Christian Education
Office of the Dean

CONFIRMATION OF EDUCATION

Directions: Please fill out the below educational information, and also please provide a copy of your transcript, or certification information. Please note that all final decisions are made by the **Dean's Office.** This form must be returned to the Dean's Office. Please email to: **pastormoh@yahoo.com**

Institution	**Dates Attended**	**Degree**	**Major/Minor**

**Have you ever been convicted of any felonies?

 Yes

 No

If you have selected Yes Please give a brief explanation:

_____

_____

_____

Printed Name: _____

_____ _____

Signature Date