

WMU Director  
Job Description

1. Serve as liaison to the Missouri WMU Board.
  - a) Serve as ex-officio member of the MWMU Board.
  - b) Work with the MWMU president in planning and executing the WMU Annual Meeting, meetings of the MWMU Board, and the state MWMU Council.
  - c) Enlist WMU Specialists and the WMU Women's Ministry Consultant and work with them in coordinating the training and enlisting of WMU Special Workers.
  - d) Facilitate a resource network with the MWMU Regional Consultants.
2. Fulfill responsibilities to help WMU function effectively in Missouri.
  - a) Build and maintain positive relationships with peers, WMU leaders, pastors, churches, Directors of Missions, and others relating to missions' education.
  - b) Be able to make presentations, lead conferences, and effectively communicate one to one, with small groups and before large audiences.
  - c) Be a visionary leader.
  - d) Plan and coordinate the training of Associational WMU Leadership.
3. Communicate on a regular basis with WMU Leadership.
4. Develop a network of trained leadership for WMU.
5. Coordinate the work of the WMU Nominating Committee.
6. Plan, coordinate and execute the state WMU calendar and budget as a part of WMU/Women's Mission and Ministry.
7. Work with MBC office support staff assigned to WMU work.
8. Keep WMU resource materials available.
9. Promote missions education that includes:
  - a) WMU age-level organizations preschool through adult.
  - b) SBC and MBC mission activities.
  - c) Training in the biblical basis of missions.
  - d) Training on what's going on in modern missions.
  - e) Involvement opportunities/projects for women, preschoolers, children, and youth.
10. Develop statewide promotion of these three key and vital mission offerings:
  - a) Annie Armstrong Offering for North American Missions
  - b) Rheubin L. South Missouri State Missions Offering
  - c) Lottie Moon Offering for International Missions
11. Oversee the ordering and mailing of promotion mailings for mission offerings.
12. Relate to SBC Woman's Missionary Union, Lifeway, and the North American Mission Board as appropriate to fulfil the responsibilities stated above.
13. Represent Missouri WMU on the WMU, SBC Board with voting rights of the state WMU Director.
14. Oversee the preserving of Missouri WMU history.

Job Description  
Missouri WMU Specialists

1. Assist in the enlisting of Special Workers in the eight regions
2. Attend national leadership training meetings as available and requested by professional staff. Expenses will be paid.
3. Train MO WMU Special Workers.
4. Assist professional staff with growth plan for MO WMU.
5. Serve as a resource to the WMU Director and WMU Board.
6. Plan and implement any state events related to assigned age-level.

Job Description  
Women's Ministry Consultant

1. Serve as liaison between national women's ministries, Missouri Women's Ministries, and MWMU.
2. Assist churches with ways to implement missions education into women's ministries.
3. Promote MWMU events and emphases.
4. Attend events to strengthen the relationship involving WMU and Women's Ministries.
5. Assist in the enlisting of Women's Ministry Special Workers/or Leadership Team as needed.
6. Serve as resource person for WMU Director and WMU Board.

Missouri WMU Board Annual Covenant                      Year \_\_\_\_\_

By: \_\_\_\_\_ Position: \_\_\_\_\_

As a member of the Missouri WMU Executive Board, I commit myself to fulfil the duties of my position as outlined in the Operational Policy and Procedures.

I will strive to complete the following goals:

Long Term Goals	Action Plan	Target Date	Completed
Short Term Goals	Action Plan	Target Date	Completed

Signed \_\_\_\_\_ Date \_\_\_\_\_  
 Person Writing Covenant

Signed by \_\_\_\_\_ Date \_\_\_\_\_  
 Missouri WMU President and/or Missouri WMU Director

Mail to: Maryetta R. Dennis  
4351 S Farm Rd 125  
Springfield, MO 65810

WMU BIOGRAPHY

Name \_\_\_\_\_  
(Last) (Maiden) (First) (Middle)

Address \_\_\_\_\_  
(Street, Route, Box) (City, State, Zip)

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_ Birth Date \_\_\_\_\_

Birth \_\_\_\_\_  
(County) (Town) (State)

Spouse \_\_\_\_\_  
(Name) (Birth Date)  
\_\_\_\_\_  
(Place of Marriage) (Date of Marriage)

Children (full name, birth date, spouse's name):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

High School: Year Grad. \_\_\_\_\_ Name of School \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_

College (name, state, years attended, degree):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vocational History (Present/prior to retirement)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Conversion: \_\_\_\_\_  
(Date) (Age) (Name of Church)

Present Church membership (name, city, state)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Local Church Activity

Sunday School: General Director \_\_\_\_\_ Department Director \_\_\_\_\_ Teacher \_\_\_\_\_  
Discipleship Training: Director \_\_\_\_\_ Department Director \_\_\_\_\_ Teacher \_\_\_\_\_  
VBS: Director \_\_\_\_\_ Teacher \_\_\_\_\_ Secretary \_\_\_\_\_  
Church Treasurer \_\_\_\_\_ Church Librarian \_\_\_\_\_ Church Clerk \_\_\_\_\_  
Choir Director \_\_\_\_\_ Choir Member \_\_\_\_\_ Church Committee Chair \_\_\_\_\_  
Others: \_\_\_\_\_

Associational Service in the above areas: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Missouri Baptist Convention Service: \_\_\_\_\_  
\_\_\_\_\_

Southern Baptist Convention Service: \_\_\_\_\_  
\_\_\_\_\_

WMU Service - Local Church  
\_\_\_\_\_  
\_\_\_\_\_

WMU Service - Associational  
\_\_\_\_\_  
\_\_\_\_\_

WMU Service – State  
\_\_\_\_\_  
\_\_\_\_\_

WMU Service – National  
\_\_\_\_\_  
\_\_\_\_\_

Use extra sheet, if needed, to detail the following:

Authorship (books, booklets, curriculum material, periodicals):

\_\_\_\_\_  
\_\_\_\_\_

Special Awards of Recognition (name, date, place):

\_\_\_\_\_  
\_\_\_\_\_

Club or Group Membership (name, date, place):

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Public Service (education, political, military):

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Hobbies and Leisure Interests:

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Signature \_\_\_\_\_

MISSOURI PRAYER NETWORK  
EMERGENCY MISSIONS PRAYER REQUESTS

1. State office will contact members of the MWMU Board. We will identify this as an emergency missions prayer request.
2. Regional Consultants will inform each associational WMU Director.
3. Regional Consultants should ask associations to pass along the request to the churches.

MWMU BOARD PERSONAL PRAYER REQUESTS

Upon notification of an emergency personal prayer request, the state office shall inform all members of the MWMU Board.

**MISSOURI BAPTIST WOMEN'S MISSIONARY PRAYER FELLOWSHIP  
BYLAWS**

**Article I: Name**

The name of this organization shall be known as the Baptist Women's Missionary Prayer Fellowship.

**Article II: Object**

The purpose of this Prayer Fellowship is to seek boldly to do the work of God by joining together to pray for spiritual awakening in the U.S.A. and around the world.

**Article III: Members**

**Section 1. Membership**

The membership shall consist of members of church Baptist Women's Missionary organizations in Missouri who desire to see spiritual awakening in the U.S.A. and around the world and desire to be an integral part of said.

**Section 2. Dues**

The membership dues shall be \$5.00 per year. Dues will be paid at the September prayer retreat each year.

**Article IV: Officers**

**Section 1. Title**

The elected officers of the Prayer Fellowship shall be: a) Chairman, b) Vice-Chairman, c) Secretary, d) Assistant Secretary, and e) Treasurer.

**Section 2. Terms of Office**

The term of office shall be for two years. The Chairman, Treasurer, and Assistant Secretary shall be elected in even years. The Vice-Chairman and Secretary shall be elected in uneven years.

**Section 3. Election**

The officers shall be active members of the Prayer Fellowship. A slate of officers shall be prepared by a Nominating Committee. The officers shall be elected at the annual prayer retreat and will begin to serve at the conclusion of the meeting when they are elected.

**Section 4. Duties**

**A. Chairman**

1. The Chairman presides at the annual prayer retreat and other meetings deemed necessary, appoints committees as needed, and leads the other officers in establishing a budget and calendar.
2. She will make plans with the other officers to strengthen the Prayer Fellowship.

**B. Vice-Chairman**

1. The Vice-Chairman is responsible for promotion.

**C. Secretary**

1. The Secretary is responsible for keeping records for the Prayer Fellowship.

**D. Assistant Secretary**

1. The Assistant Secretary is to assist the Secretary and perform secretarial duties in the absence of the Secretary.

**E. Treasurer**

1. The Treasurer is responsible for dues collection and keeping accurate records of receipts and disbursements.

**Article V: Meetings**

Section 1. Officers

The officers will meet to plan as deemed necessary.

Section 2. Annual Prayer Retreat

The annual prayer retreat will be held in September at Windermere and will be planned by the officers.

**Article VI: Parliamentary Authority**

The rules contained in *Robert's Rules of Order, Newly Revised* shall govern the Executive Council in all cases where they are applicable.

**Article VII: Bylaws Revisions**

These Bylaws may be revised at any regular meeting of the Prayer Fellowship by a two-thirds vote of members present.

Revised 9/17/91

Mary O. Bidstrup Scholarship

This scholarship is available through the Alberta Gilpin Fund for churches and/or campuses that have no WMU organizations. This scholarship is given as a memorial to Mary O. Bidstrup who served as Executive Secretary of Missouri WMU.

Based upon resources available, a maximum of eight (8) \$100 scholarships are granted annually. Applications are distributed each year to associational WMU Directors. The scholarship check shall be sent to the person recommending the applicant. These scholarships shall be used to begin WMU work by providing money for WMU training and/or materials.

A church or campus may apply for the scholarship by being recommended by the associational WMU Director, or associational Director of Missions. The application is mailed to Missouri WMU Vice-President and scholarships are approved and granted on a first come-first served basis.

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 Mary O. Bidstrup Scholarship Fund Application  
 \$100 Scholarship

Name of Church/Campus \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Association \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

This money shall be used in the following ways for training and/or materials:

<u>Item</u>	<u>Amount</u>
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This shall enable us to begin \_\_\_\_\_  
 (age-level organization)

Recommended by: \_\_\_\_\_ Date \_\_\_\_\_

Position \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Send to: Betty Hampton  
 MO MWU Vice-President  
 HC 1 Box 808  
 Fairdealing, MO 63939  
 573-857-2233

**RECOMMENDATION TO NOMINATING COMMITTEE**

I would like to recommend:

Name \_\_\_\_\_

Address \_\_\_\_\_

(Street, Route, or Box)

\_\_\_\_\_  
(City, State, Zip)

Phone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Church \_\_\_\_\_ Association \_\_\_\_\_

Recommended for (circle one):

President

Regional Consultant

Missionary Advocate

Prayer Advocate

Communications Consultant

Language Consultant

African-American Consultant

Nominating Committee

Vice-President

Secretary

Treasurer

Reasons for recommending this person:

Submitted by:

Name \_\_\_\_\_

Address \_\_\_\_\_

(Street, Route, or Box)

\_\_\_\_\_  
(City, State, Zip)

Return to: Chairman, Nominating Committee (address/city/state/zip) by November 1.

This form may be copied if you want to make additional recommendations.

Qualifications for MWMU Board/Nominating Committee:

1. Each member shall be an active participant in local, associational, and state WMU activities.
2. Each member shall have current WMU leadership experience in the local church.
3. Each member shall be involved in the total program of the local church.
4. Each member shall have proven ability to communicate with all WMU publics.
5. The President shall have served previously on the Board of Directors, formerly known as Leadership Team Executive Committee.
6. The Secretary, Treasurer, and Communications Consultant shall have access to and knowledge of computer technology.
7. The Regional Consultants shall have experience as an officer in Associational WMU.

**MEMO TO:** (NAME)  
**FROM:** Missouri WMU Nominating Committee  
**DATE:**

Greetings to a partner in missions!

You are one of several being recommended to serve on the Missouri WMU Board of Directors as \_\_\_\_\_ This team is made up of women involved in local and state WMU work that carry on the business of Missouri WMU. This group meets at least twice a year to share together about work in our state and to develop strategies to further God's Kingdom through effective mission education and to mobilize churches and individuals to missions involvement.

If you are interested in being considered for this important position, please fill out the enclosed Profile Sheet and return it to the Chairman of the Nominating Committee by (DATE).

Sometime during mid-December you will receive a call from one of the members of the WMU Nominating Committee to do a personal phone interview with you. If you have any questions about meetings, expectations, etc. this is the person to whom you can relay those questions. You can also call the Chairman of the Committee who is listed at the bottom of the Profile Sheet.

THANKS for all you do in your part of Missouri to promote missions and the cause of Christ.

Attach a recent photo of yourself

PROFILE SHEET

Name \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Fax \_\_\_\_\_

Place of Employment \_\_\_\_\_

Children \_\_\_\_\_ Ages or Adult \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Year of high school graduation \_\_\_\_\_ Name of school \_\_\_\_\_

Year of college graduation \_\_\_\_\_ Name of school \_\_\_\_\_

Degrees \_\_\_\_\_

Vocational History (list any positions held two or more years)

Tell us about your conversion experience.

Church membership

Name \_\_\_\_\_ City \_\_\_\_\_ Association \_\_\_\_\_

WMU Service – Local Church \_\_\_\_\_

WMU Service – Associational \_\_\_\_\_

WMU Service – State \_\_\_\_\_

WMU Service – National \_\_\_\_\_  
\_\_\_\_\_

Other Local Church Activity \_\_\_\_\_  
\_\_\_\_\_

Other Associational Service \_\_\_\_\_  
\_\_\_\_\_

Other Missouri Baptist Convention Service \_\_\_\_\_  
\_\_\_\_\_

Southern Baptist Convention Service \_\_\_\_\_  
\_\_\_\_\_

What gifts and abilities would you bring to this position?

What is your vision for this position, as you understand it?

We will ask the following persons to send a reference:

Your church WMU Director:

\_\_\_\_\_  
Name Address Phone

Your associational WMU Director:

\_\_\_\_\_  
Name Address Phone

Your pastor:

\_\_\_\_\_  
Name Address Phone

Your Director of Missions:

\_\_\_\_\_  
Name Address Phone

Please list two other references you wish us to contact

\_\_\_\_\_  
Name Address Phone Relationship

\_\_\_\_\_  
Name Address Phone Relationship

This form as been filled in by \_\_\_\_\_  
Signature Date Phone

Return to: Chairman, address, phone  
**Deadline to return to be considered: (DATE)**

## REFERENCE FORM

Reference on \_\_\_\_\_

Address \_\_\_\_\_

This person is one of several recommended to serve on the Missouri WMU Board of Directors. This team is made up of women involved in local and state WMU work that carry on the business for Missouri WMU. Please fill out the following based on your opinion of her. (If you do not know, check "no information.")

Is she spiritually mature? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Is she growing spiritually? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Does she have WMU experience? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Is she involved in her local church?  
If yes, how? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_Is she involved in her association?  
If yes, how? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Is she a leader? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Is she a self-starter? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Does she work well with other people? Yes \_\_\_\_\_ No \_\_\_\_\_ No information \_\_\_\_\_

Comments:

What are her:

STRENGTHS

WEAKNESSES

What are her special talents, skills, abilities, etc.?

Would you recommend her to serve? Yes \_\_\_\_\_ No \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Relationship \_\_\_\_\_ How many years? \_\_\_\_\_

DEADLINE DUE: FEBRUARY 1

Please return to: Chairman, address, phone

ONLY THE NOMINATING COMMITTEE WILL HAVE ACCESS TO THIS FORM.

MISSOURI ACTEENS COUNCIL APPLICATION

I, \_\_\_\_\_, understand the Missouri Acteens Council requirements  
(Print name)  
and responsibilities. I agree, should I be chosen, to adhere to those guidelines. I acknowledge  
that

\_\_\_\_\_ and \_\_\_\_\_  
(My Acteens Advisor) (Other adult name)  
are nominating me for the Council.

Are you a Christian? \_\_\_\_ yes \_\_\_\_ no. Write a paragraph telling us about your conversion  
experience (may use back of paper or attach a separate sheet).

Write a paragraph on why you would like to serve on the Missouri Acteens Council (may use back  
of paper or attach a separate sheet).

Make comprehensive list of activities (church, school, community) in which you are involved (may  
use back of paper or attach a separate sheet).

Church Name \_\_\_\_\_ City \_\_\_\_\_

Acteens Advisor's Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Pastor's Signature \_\_\_\_\_

Parent/Legal Guardian Consent

I consent for \_\_\_\_\_ to serve as a member of the Missouri  
Acteens Council, and I give my permission for her to attend the required meetings.

Parent/Legal Guardian Signature \_\_\_\_\_

Acteen's Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Deadline for Missouri Acteens Council Nomination Forms and Application - **MARCH 1.**

Send to: Missouri WMU Director  
Missouri Baptist Convention  
400 East High Street  
Jefferson City, MO 65101  
Telephone Number: 573-635-7931

**Please send a black and white photo with application (application will not be accepted  
without it). Photo needs to be clear and sharp for use in Missouri Baptist publications.**

(MUST BE FILLED OUT BY ACTEENS ADVISOR)

MISSOURI ACTEENS COUNCIL NOMINATION

1. Name of Acteen \_\_\_\_\_
2. Address \_\_\_\_\_  
(Street, Route, or Box)  
\_\_\_\_\_  
(City) \_\_\_\_\_ (Zip)  
Telephone Number \_\_\_\_\_ email \_\_\_\_\_
3. Birth Date \_\_\_\_\_  
Age \_\_\_\_\_ Grade in School \_\_\_\_\_ Years as an Acteen \_\_\_\_\_
4. Missions Quest Level achieved \_\_\_\_\_\*
5. Involvement in church Acteens activities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Involvement in associational Acteens activities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Other activities in which she is involved (church, community, school, mission trip, activators, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Special talents, abilities, interests \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Why do you think this Acteen ought to serve on the Missouri Acteens Council?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*This includes StudiAct levels completed also.

10. Is this Acteen a Christian? \_\_\_\_\_ How long? \_\_\_\_\_

11. Acteen's Church \_\_\_\_\_

12. Other comments:

13. Your signature \_\_\_\_\_ Date \_\_\_\_\_

14. Your relationship with nominee and how long have you known her?

\_\_\_\_\_  
\_\_\_\_\_

Deadline for nomination forms and application from Acteen is **MARCH 1**.

Send forms to: Missouri WMU Director  
Missouri Baptist Convention  
400 East High Street  
Jefferson City, MO 65101  
Telephone Number: 573-635-7931  
Fax: 573-659-7436

(MUST BE FILLED OUT BY AN ADULT- other than parent)

MISSOURI ACETEENS COUNCIL NOMINATION

1. Name of Acteen \_\_\_\_\_
2. Acteen's Church \_\_\_\_\_  
(City)
3. Activities in which Acteen is involved (church, community, school) \_\_\_\_\_
  
4. Special talents, abilities, interests \_\_\_\_\_
  
5. Why do you think this Acteen ought to serve on the Missouri Acteens Council?
  
6. Other comments:
  
7. Your Signature \_\_\_\_\_ Date \_\_\_\_\_
8. Your relationship with nominee and how long have you known her? \_\_\_\_\_

Deadline for nomination forms and application from Acteen is **MARCH 1.**

Send forms to: Missouri WMU Director  
Missouri Baptist Convention  
400 East High Street  
Jefferson City, MO 65101  
Telephone Number: 573-635-7931  
Fax: 573-659-7436

Please send completed form to president.

Date\_\_\_\_\_

Mail by\_\_\_\_\_

Missouri WMU Board of Directors Quarterly Report Form

Name\_\_\_\_\_

\_\_\_\_\_Number of conferences led this quarter.  
Where and how many participants?

\_\_\_\_\_Number of other types of contacts made.  
What kind of contacts and how many?

\_\_\_\_\_Number of long-term goals identified in Annual Covenant completed

\_\_\_\_\_Number of short-term goals identified in Annual Covenant completed

Other comments use back of page.

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Mileage\_\_\_\_\_

Expenses (with receipts)\_\_\_\_\_

**MISSOURI EMERGING LEADERS NOMINATION FORM**

**Deadline: July 1, 200**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ e-mail \_\_\_\_\_

Age \_\_\_\_\_ School grade \_\_\_\_\_ Acteens group \_\_\_\_\_

Church membership \_\_\_\_\_ Association \_\_\_\_\_

Check the activities in which the applicant has been involved. The applicant is to write a brief explanation or description of each involvement on a separate sheet of paper.

- \_\_\_\_\_ Missions/ministry projects
- \_\_\_\_\_ Witnessing
- \_\_\_\_\_ Acteens/Missions Interchange missions events
- \_\_\_\_\_ Missions Quest
- \_\_\_\_\_ Missions trips
- \_\_\_\_\_ WMU camps/retreats
- \_\_\_\_\_ WMU camps/retreats (age appropriate)
- \_\_\_\_\_ Associational or church officer/planning groups
- \_\_\_\_\_ NAC

Applicant must be available for

- “Summit”: in August, Jefferson City
- Annual Meeting (April)
- Blume:

Signed \_\_\_\_\_  
Church WMU Director

Signed \_\_\_\_\_  
Acteens Advisor

Return this form with 4 letters of recommendation from (1) Church WMU director, (2) Acteens Advisor, (3-4) two other persons (such as pastor, church staff, etc..) on or before July 1, 200 . In the letters of recommendation, each person should respond to the following:

1. Give an example of how this applicant has been involved in doing missions. Missions is what the church does to take the love of Jesus Christ to persons not related to the church.
2. Share how the applicant has demonstrated a missions lifestyle.
3. Tell how the applicant has demonstrated leadership skills.
4. How has the applicant shown a quality missions life?
5. How has the applicant participated in missions learning experiences?

Send the nomination form and all letters to:

Lorraine Powers  
815 SW Woods Chapel Road  
Blue Spring, MO 64015