

THEOLOGICAL SEMINARY CHURCH PLANTING SURVEY FORM

Instructions:

- i. The information required in this survey is to be completed in synergy by the School Officers.
- ii. Completed forms are to be returned to the NATIONAL TASK FORCE AGDRMU through the National Research, Statistics and Archives Department.
- iii. The information you are to provide should be current.

| NAME | OF SEMINARY: | |
|---------|--------------------------------------------------------------------------------------------------------------------|-------------------------|
| 1. | When was your seminary established? | |
| 2. | What is the vision statement of your institution? | |
| 3. | What is the total current student enrollment (as at May 2015)? | |
| Figure | | _ |
| No of r | males: No of females | |
| 4. | How many teachers are in General Council payroll in your seminary? ——— | |
| 5. | How many adjunct lecturers are in your seminary? | |
| 6. | How many of your students are AG members: Figure: Words: | |
| 7. | How many of your students are non-AG members. Figure: ———— Words: ———————————————————————————————————— | |
| 8. | How many churches has your school planted five years? | |
| 9. | Who is in charge of the Missionary Band Service in your school? His/her name Phone number | |
| 10. | Phone number Does you institution have a church planting/mission field(s)? Yes { } No location(s). | { }. If yes mention the |
| 11. | Does your institution work in collaboration with any mission agency as missions and church planting? Give details. | |
| | | |

| 12. Do you think there are possibilities of planting more churches in your catchment area during the Decade of Rapid Multiplication? Please tick the appropriate on YES { } NO { } |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 13. How many churches do you project to be planted by your school during this period? Please tick the |
| one you consider most appropriate. |
| a. Below 20 |
| b. Between 21 – 50 |
| c. 51 – 70 |
| d. 71 – 100 |
| 14. Classify your institution in terms of urbanization |
| a. Typical rural setting |
| b. Mixed urban and rural setting |
| c. Urban settlement |
| d. Mega city |
| 15. Do have any ministry program/cooperation with the following establishments within you sponsoring units? |
| University, Polytechnic, College of Education, School of Nursing, other tertiary institution |
| Teaching Hospital/Specialist Hospital/Federal Medical Center, etc. |
| Yes { } No { } |
| If yes, give little explanation. |
| 16. Is your institution currently supporting or sponsoring missionaries? Yes { } No { } If yes, how many are national missionaries How many are foreign missionaries |
| Addendum |
| If there is any other information you consider important towards a successful take off of the Decade Rapid of Multiplication, please reach us through these phone numbers: |
| 1. 08100273333 – Chairman Task Force Decade of Rapid Multiplication |
| 2. 08034034584 – Vice Chairman Task Force Decade of Rapid Multiplication |
| 3. 08037745836 – Secretary Task Force Decade of Rapid Multiplication |
| 4. 08030981441 – Director Research, Statistics & Archives |
| Our email address is agdrm1525@yahoo.com |
| <u>Attestation</u> |
| We hereby attest that the information given in this survey is trustworthy and will give a good lead towards fulfilling vision AGDRMU. |
| No title required here. |

President's name & signature:

Vice President's name & signature:

| Registrar's name & signature: | | |
|-------------------------------|--|--|
| Bursar's name & signature: | | |
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