

**BACKGROUND INFORMATION FOR SESSION AND
COMMITTEE ON PREPARATION FOR MINISTRY**

PERSONAL INFORMATION

NAME OF APPLICANT: _____
(FAMILY) (FIRST) (MIDDLE/NATAL)

CURRENT ADDRESS: _____
(STREET OR PO BOX) (CITY) (ST) (ZIP)

MAIN PHONE #: _____ ALT. PHONE #: _____
(H/O/M) (H/O/M)

E-MAIL: _____

PERMANENT ADDRESS: _____
(IF SAME, WRITE IN "SAME") (STREET OR PO BOX) (CITY) (ST) (ZIP)

GENDER: _____ DATE OF BIRTH: _____ ETHNIC ORIGIN: _____

FAMILY SITUATION

MARITAL STATUS: SINGLE ___ MARRIED ___ SEPARATED ___ DIVORCED ___ WIDOWED ___

BIRTHDATES OF CHILDREN: _____

ARE YOU AND YOUR FAMILY MEMBERS OPEN TO THE POSSIBILITY OF RELOCATION IN CONJUNCTION WITH THEOLOGICAL STUDIES AND/OR ACCEPTING A MINISTRY POSITION? YES ___ /NO ___

IF YOU ARE LIMITED IN YOUR ABILITY TO RELOCATE, PLEASE DESCRIBE ON THE FOLLOWING LINES:

CHURCH INFORMATION

YEAR OF YOUR BAPTISM: _____ YEAR OF YOUR CONFIRMATION/PROFESSION OF FAITH: _____

CHURCH OF MEMBERSHIP: _____

APPROXIMATE NUMBER OF MEMBERS: _____ DATE JOINED: _____

MOST RECENT PREVIOUS CHURCHES (INCLUDE UP TO THREE): _____ DATES OF MEMBERSHIP: _____

HAVE YOU BEEN ORDAINED AS AN ELDER IN THE PC(USA) [Y/N]? _____ DATE: _____

HAVE YOU BEEN ORDAINED AS A DEACON IN THE PC(USA) [Y/N]? _____ DATE: _____

HAVE YOU BEEN ORDAINED IN ANOTHER DENOMINATION [Y/N]? _____ DATE: _____

IF SO, NAME OF DENOMINATION: _____ OFFICE: _____

POD Form 1A

LIST UP TO FIVE AREAS OF INVOLVEMENT IN THE LIFE AND MISSION OF THE CHURCH, EITHER AS A PARTICIPANT (P) OR LEADER (L), THAT ARE MOST SIGNIFICANT IN YOUR SENSE OF CALL TO THE MINISTRY OF WORD AND SACRAMENT (MARK CURRENT INVOLVEMENT WITH AN ASTERISK [*]).

AREA OF INVOLVEMENT:	P OR L?
_____	_____
_____	_____
_____	_____
_____	_____

ACADEMIC INFORMATION

LIST THE ACADEMIC INSTITUTIONS YOU HAVE ATTENDED, BEGINNING WITH HIGH SCHOOL, AND SUPPLY THE INFORMATION REQUESTED IN EACH COLUMN. IF YOU ARE CURRENTLY PURSUING AN EDUCATIONAL PROGRAM, INDICATE YOUR ACADEMIC CLASSIFICATION IN THE FINAL COLUMN.

INSTITUTION	DATES ATTENDED	PROGRAM OR MAJOR	ACADEMIC AVERAGE	DIPLOMA/ DEGREE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

BRIEFLY DESCRIBE YOUR ACADEMIC INTERESTS/GIFTS BY COMPLETING THE FOLLOWING TABLE:

	SUBJECTS IN WHICH YOU DID YOUR BEST ACADEMIC WORK	SUBJECTS IN WHICH YOU DID LESS WELL
HIGH SCHOOL	_____	_____
COLLEGE	_____	_____
GRADUATE SCHOOL	_____	_____
PROFESSIONAL SCHOOL	_____	_____

HAVE YOU EVER HAD AN "INDIVIDUALIZED EDUCATIONAL PROGRAM"? YES ___ /NO ___

WHAT ACCOMMODATIONS DID THE IEP INCLUDE? _____

ON THE LINES BELOW, LIST YOUR ACADEMIC HONORS, AWARDS, SPECIAL RECOGNITIONS, SPORTS, ORGANIZATIONS AND EXTRACURRICULAR ACTIVITIES THAT HAVE BEEN MOST MEANINGFUL :

OCCUPATIONAL HISTORY

BEGINNING WITH YOUR CURRENT OR MOST RECENT POSITION, LIST ALL FULL-TIME OR PART-TIME JOBS OR OCCUPATIONS IN WHICH YOU HAVE BEEN EMPLOYED. INCLUDE THE FIVE (5) MOST RECENT IN UP TO THE PAST TWENTY (20) YEARS. INDICATE PART-TIME BY PLACING "PT" BESIDE TITLE.

JOB TITLE	DATES	WHAT DID YOU ENJOY MOST?	WHAT DID YOU ENJOY LEAST?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REFERENCES

REFERENCES SHOULD INCLUDE AT LEAST TWO OF THE FOLLOWING: SOMEONE FROM YOUR CHURCH; A FORMER EMPLOYER; A PEER; OR A FORMER PROFESSOR OR SCHOOL ADMINISTRATOR.

NAME: _____
(TITLE) (FIRST) (FAMILY)

ADDRESS: _____
(STREET OR PO BOX) (CITY) (ST) (ZIP)

MAIN PHONE #: _____ **ALT. PHONE #:** _____
(H/O/M) (H/O/M)

EMAIL: _____

HOW LONG HAVE YOU KNOWN THIS PERSON? _____

NAME: _____
(TITLE) (FIRST) (FAMILY)

ADDRESS: _____
(STREET OR PO BOX) (CITY) (ST) (ZIP)

MAIN PHONE #: _____ **ALT. PHONE #:** _____
(H/O/M) (H/O/M)

EMAIL: _____

HOW LONG HAVE YOU KNOWN THIS PERSON? _____

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