

APPLICATION TO BE ENROLLED BY PRESBYTERY AS A CANDIDATE

PRESBYTERY _____

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: _____

CHURCH OF MEMBERSHIP: _____
(NAME OF CHURCH)

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

DATE ENROLLED AS AN INQUIRER: _____

IN WHAT CHURCH OCCUPATION ARE YOU INTERESTED AT THIS TIME? (e.g., PASTOR, YOUTH MINISTER,
MISSION WORKER, CHRISTIAN EDUCATOR, ETC.) _____

PRESENT SCHOOL ATTENDING: _____

LOCATION: _____ EXPECTED GRADUATION: _____
(CITY) (ST)

FORMER/CURRENT OCCUPATION: _____

INQUIRER'S STATEMENT

I HEREBY APPLY TO BE ENROLLED BY THIS PRESBYTERY AS A CANDIDATE.

____ I certify no civil, criminal, ecclesiastical complaint has ever been sustained or is pending against me.

____ I am unable to make the above certification. I offer instead on the attachment a description of the complaint and/or outcome of the situation with explanatory comments.

IF RECOMMENDED TO BE A CANDIDATE FOR THE MINISTRY OF THE WORD AND SACRAMENT, I PROMISE IN RELIANCE UPON THE GRACE OF GOD TO PARTICIPATE DILIGENTLY AND WHOLEHEARTEDLY WITH THE SESSION AND THE PRESBYTERY'S COMMITTEE ON PREPARATION FOR MINISTRY IN MATTERS WHICH CONCERN PREPARATION.

INQUIRER'S SIGNATURE: _____ (DATE)

REFERENCES

PLEASE IDENTIFY THREE PERSONS WHO COULD SPEAK TO YOUR PROGRESS IN MINISTRY; **A PROFESSOR, A SUPERVISOR AND A COLLEAUE WHO HAS WORKED WITH YOU IN THE PAST YEAR.**

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? _____
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? _____

SESSION EVALUATION AND RECOMMENDATION

BY THE END OF THE INQUIRY PHASE EACH INQUIRER SHALL DEMONSTRATE ADEQUATE PROMISE FOR MINISTRY BY PRESENTING:

- 1) A STATEMENT OF HIS OR HER UNDERSTANDING OF CHRISTIAN VOCATION IN THE REFORMED TRADITION AND HOW IT RELATES TO HIS OR HER SENSE OF CALL;
- 2) A STATEMENT OF PERSONAL FAITH WHICH INCORPORATES AN UNDERSTANDING OF THE REFORMED TRADITION;
- 3) AN ANALYSIS OF AT LEAST ONE CONCEPT FROM THE PERSONAL FAITH STATEMENT REGARDING WHAT IT SUGGESTS ABOUT GOD, HUMANITY, AND THEIR INTERRELATIONSHIPS;
- 4) A STATEMENT OF WHAT IT MEANS TO BE PRESBYTERIAN, INDICATING HOW THAT AWARENESS GROWS OUT OF PARTICIPATION IN THE LIFE OF A PARTICULAR CHURCH;
- 5) A STATEMENT OF SELF-UNDERSTANDING WHICH REFLECTS THE INQUIRER'S PERSONAL AND CULTURAL BACKGROUND AND INCLUDES A CONCERN FOR MAINTAINING SPIRITUAL, PHYSICAL, AND MENTAL HEALTH;
- 6) A STATEMENT OF HIS OR HER UNDERSTANDING OF THE TASK MINISTRIES OF THE WORD AND SACRAMENT PERFORM, INCLUDING AN AWARENESS OF HIS OR HER SPECIFIC GIFTS FOR MINISTRY OF THE WORD AND SACRAMENT AND OF AREAS IN WHICH GROWTH IS NEEDED`

THE SESSION OF _____ MET WITH _____
(NAME OF CHURCH) (CITY) (ST)
_____ ON _____ AND SUBMITS THE FOLLOWING REPORT:
(NAME OF INQUIRER) (DATE)

THE SESSION ENDORSES _____ /DOES NOT ENDORSE _____ THIS INQUIRER'S REQUEST TO BE ENROLLED AS A CANDIDATE.

POD FORM 5A

NAME: _____

LIAISON

THE SESSION HAS (RE-) APPOINTED THE FOLLOWING ELDER TO ACT AS LIAISON WITH THIS INDIVIDUAL AND WITH THE PRESBYTERY'S COMMITTEE ON PREPARATION FOR MINISTRY, AND TO PARTICIPATE WITH THE INDIVIDUAL AND THE COMMITTEE AS THEY EXPLORE AND EVALUATE HIS OR HER PROGRESS (Presbytery of Detroit Policy CPM-1)

NAME: _____
(FIRST) (FAMILY)

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

E-MAIL: _____

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

THIS REPORT WAS PREPARED FOR THE SESSION BY:

(NAME) (POSITION)

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

E-MAIL: _____

Session will copy & mail all pages of Form 5A to the Presbytery's CPM and Stated Clerk

REPORT OF ENROLLMENT AS A CANDIDATE BY PRESBYTERY

(NAME OF INQUIRER) WAS ENROLLED AS A CANDIDATE BY

(NAME OF PRESBYTERY) ON _____
(DATE)

SIGNATURE OF STATED CLERK: _____

Presbytery Stated Clerk will copy all pages of this Form 5A and mail to: Office of the General Assembly, Presbyterian Church (U.S.A.), 100 Witherspoon Street – Room 4429, Louisville, KY 40202-1396 AND to the Candidate