

*Application for Ministry Appointment
East Michigan Conference
Free Methodist Church-USA*

Note to the Applicant:

The purpose of the questions in this document is to provide the Ministerial Education and Guidance Board with background information that will help them to get to know you. It will be used as a basis for mutual discussion and will become a part of your ministry portfolio available to other conferences in the event of transfer. In completing this form, please type or write legibly, using black ink.

Because there is great variety in age and experience of persons making application, this questionnaire is purposely broad in scope. Please use extra paper as needed to provide additional information you feel will give the fairest representation of yourself. Please be as accurate and candid as you can. Thank you.

Statement of Intent and Release of Information

I, _____ hereby wish to be considered for ministry within the Free Methodist Church-USA (hereinafter “church”). After reviewing the current *Book of Discipline*, outlining the goals and responsibilities of ministers including organizational structure and doctrine, I freely submit myself to the guidance, counsel and disciplines of the annual conference board of ministerial education and guidance. I fully understand and agree that the decision of the Ministerial Education and Guidance Board regarding my suitability and readiness for ministry will involve questions and inquiries that are both personal and private. I hereby release the church and its annual conference, agents and representatives from any claims, causes, or actions, which may arise from this inquiry. Further, I grant permission to the annual conference Ministerial Education and Guidance Board to contact any person listed by me as a reference or any other person not so listed to discuss my suitability and readiness. I also grant permission for the conference superintendent to make periodic copies of my transcript(s) for the Ministerial Education and Guidance Board as needed.

I covenant with God, my bishop, superintendent, and the Ministerial Education and Guidance Board, to rely upon the grace of God to maintain Christian character and conduct; to be diligent and faithful in pursuing my call, and in preparing for ministry within the Free Methodist Church-USA.

Signature: _____ Date: _____

Signature of Witness: _____ Date: _____

Please Return to:

*East Michigan Conference
Free Methodist Church of North America
Box 23
Clio, MI 48420
email: office@emcfree.org*

Personal Information

Name: _____
(Last) (First) (Middle)

Social Security Number: _____

Mailing Address: _____
(Street or PO Box)

(City and State)

(Zip Code)

Place of Birth: _____
(City and State) (Country)

Citizen of what country: _____

Phone Number: Home _____ Work _____

E-mail Address: _____

Ordination Status: _____ Denomination: _____

Fluent in what language(s): _____

FAMILY OF ORIGIN

Name of Father: _____ Name of Mother: _____

Address: _____ Address: _____

Occupation: _____ Occupation: _____
(If retired or deceased, list previous occupation.)

Describe Parents Marriage Happy Average Unhappy Separated Divorced Remarried

How would you describe your family of origin's view of organized religion? _____

CURRENT REFERENCES

Please identify four persons who know you well, (no relatives please), and who could speak to your progress in personal, spiritual, and professional development. One person should be your pastor. If you are currently serving as a pastor, two references should be from lay people within the congregation you serve; another from a person who could speak to your academic background, and the name of your current ecclesiastical supervisor.

Name: _____
First Last

Address: _____
Street City State Zip

Relationship: _____ Phone: _____

This information is complete and accurate _____ (initial)

Applicant's Name: _____

Name: _____
First Last

Address: _____
Street City State Zip

Relationship: _____ Phone: _____

Name: _____
First Last

Address: _____
Street City State Zip

Relationship: _____ Phone: _____

Name: _____
First Last

Address: _____
Street City State Zip

Relationship: _____ Phone: _____

YOUR MARITAL STATUS

Single _____ Engaged _____ Married _____ Separated _____ Divorced _____ Widow(er) _____

If married, spouse's name: _____

Date of current Marriage: _____

Rate your own marriage: Happy _____ Average _____ Unhappy _____

Previous marriage of yourself: Date of marriage(s) _____ Date terminated _____

Terminated by death? _____ By divorce? _____

Previous marriage of spouse: Date of marriage(s) _____ Date terminated _____

Terminated by death? _____ By divorce? _____

FAMILY DEPENDENTS

Minor dependent children living at home (Give name and age)

1. _____ 2. _____ 3. _____ 4. _____

Other dependents: _____

This information is complete and accurate _____ (initial)

Applicant's Name: _____

YOUR EDUCATION

	Name of School and Location	Dates of Attend. From To	Major Subject	Did you Graduate?	Degree Awarded	# of college credits received
High School	_____	_____	_____	_____		

College	_____	_____	_____	_____	_____	_____

Seminary	_____	_____	_____	_____	_____	_____

Other Schools	_____	_____	_____	_____	_____	_____

Please attach certified copies of transcripts from college, seminary, etc.

Extra-Curricular Activities: (List sports, band, orchestra, speaking, social, hobbies, etc.)

SPOUSAL SUPPORT OF YOUR MINISTRY

Spouse's religious background: _____

Spouse's current church involvement: _____

What do you consider to be the appropriate relation between your marriage and your potential ministry?

TO BE COMPLETED BY SPOUSE

It will be more helpful for the candidate's spouse to answer the following:

How do you feel about your spouse's decision to pursue a ministry appointment? Please note any concerns you might have.

Signed: _____

This information is complete and accurate _____ (initial)

Applicant's Name: _____

RELIGIOUS BACKGROUND

Church regularly attended as a child _____

City _____ State _____

Approximate size of the congregation _____

Describe the scope and extent of your church participation (e.g. worship, small groups, outreach, para-church, other):

YOUR INTEREST IN MINISTRY

Why are you interested in applying for a ministry appointment within the Free Methodist Church?

From your perspective, what is unique about the Free Methodist Church? _____

What experience(s) led you to seek a career in ministry? _____

Who are the people you have talked to about your ministry plans and how have they influenced you?

To what type of ministry do you feel especially called? (Check three of the following to indicate your special calling.)

Music _____	Educator _____	Inner City Ministry _____	Suburban Ministry _____
Youth Ministry _____	Pastor _____	Rural Ministry _____	Chaplain _____
Church Planter _____	Evangelist _____	Camping _____	Missions _____
Church Administrator _____	Other _____		

What are your educational plans for reaching your goal in this type of ministry? _____

This information is complete and accurate _____ (initial)

Applicant's Name: _____

INFORMATION ABOUT YOUR PERSONAL LIFE (Use additional sheet to complete your answer.)

Describe your most significant religious experiences and why they were meaningful to you. _____

Describe a person you know (name not necessary) whom you consider to be an outstanding example of Christian life and why?

As you see yourself list three (3) of your most important strengths and three (3) of your weaknesses.

Strengths

Weaknesses/Growth Areas

- | | |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |

EMPLOYMENT HISTORY

Give the most recent experience first. Be sure that the addresses are correct.

Employed From/To _____

Name/Address of Employer _____

Position _____

Name of Immediate Supervisor _____

Reason for leaving _____

Have you ever been dismissed from any job? Yes _____ No _____

If yes, please explain. _____

This information is complete and accurate _____ (initial)

Applicant's Name: _____

If currently serving as a pastor, please complete the following:

Church Name/Address	Position	Dates Served	Attendance	Membership
			Begin/End	Begin/End
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

MILITARY SERVICE RECORD

Were you ever in the military service? Yes _____ No _____

Branch	Service Dates	Rank	Special Training	Type of Discharge
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

HEALTH INFORMATION

Rate your physical health: Very Good _____ Good _____ Average _____ Poor _____

Rate your emotional health: Very Good _____ Good _____ Average _____ Poor _____

Have you ever had a sexual experience that was frightening or traumatic? Yes _____ No _____

Comment: _____

LEGAL HISTORY

Please complete on the following page.

I hereby certify that the information provided on this form is accurate.

Signed _____ Date _____

**LEGAL HISTORY AFFIDAVIT
FREE METHODIST CHURCH - USA**

Please complete this form and have it notarized. Return completed form with your Ministry Application to your Superintendent.

Have you ever been:

1. Accused of sexual harassment? No _____ Yes _____ Explain _____

2. Formally charged with sexual harassment? No _____ Yes _____ Explain _____

3. A defendant in a criminal proceeding? No _____ Yes _____ Explain _____

4. Arrested, indicted, or convicted for any misdemeanor or felony? No _____ Yes _____
If 'yes', please provide complete information listing the date of conviction, court, sentence (if any), and final disposition.

Felony / Misdemeanor _____

Date of Conviction _____

Court _____

Sentence _____

Final Disposition _____

Under penalty of perjury, I certify that I have never been convicted of a felony or misdemeanor.

If this applies to you, please initial here: _____

Name _____ Signature _____
(print)

Date _____

Notary _____

Notary Signature _____