Preparing to Pastor - Application

Office Use Only Childcare Policy References Returned Application Approved

Name:			Date of Registration:	
Address:				
City:	State:	Zip:	Birth Date:	
Home Phone:		Cell Phone: _		
E-Mail Address:		Occupation:		
Marital Status:	□ Single, No □ Widowed	ever married	Divorced & RemarriedMarried	
In case of an emergency	call: Name		Phone Relationship:	
recommendation from yo Training Program. That I	ur church indicat etter must accor	ing their support on pany this application	e Church, we will need a letter of f your studies in our Pastoral tion.	
Have you ever personally	•			
Have you ever personally	/ discipled a new	Christian?		
What do you feel your sp	iritual gift is?			
Have you enrolled in any	previous formal	Bible study? □ Y	es 🗆 No	
If your answer to the prev	vious question is	"yes," what is the	name of the school?	
School Name		City	State	
Formal Education (circl High School 9	e highest grade 0 10 11	completed): 12		
College 1 2	3 4 Mas	ter's Degree	Doctorate	
Do you meet the pastora	I requirements of	I Timothy 3 and T	Titus 1? Your family?	
What are your future min	istry goals (i.e. pa	astor, missionary)	?	
	of Medora Comm	unity Bible Church	ull agreement with the constitution and, if I am accepted as a student,	
	Signature		Date	

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