

**Commission on Ministry
Christian Church (Disciples of Christ) in North Carolina**

APPLICATION FOR CANDIDACY

Ordained Ministry

BIOGRAPHICAL INFORMATION

NAME _____ DATE _____
(Last) (First) (Middle)

ADDRESS _____
(Street/P. O. Box) (City) (State) (Zip Code)

E-MAIL ADDRESS: _____

TELEPHONE _____
(Home) (Work)

DATE OF BIRTH _____ (optional)

PLACE OF BIRTH _____

FAMILY: (Please describe your family)

CHURCH INFORMATION

Date of Baptism _____

Name & Location of Congregation _____

Where is your church membership currently? _____

Have you been a member of congregation(s) in other denomination? Yes _____ No _____

If "Yes" please describe:

Describe your involvement in the life of the church from Middle school until the present:

EDUCATIONAL BACKGROUND

High School _____

Graduation Date _____

College _____

Graduation Date _____ Degree _____

Seminary _____

Graduation Date _____ Degree _____

Graduate School _____

Graduation Date _____ Degree _____

EMPLOYMENT

Please list secular and church work experience, including; Employer, Location, Dates and positions held:

<u>Name</u>	<u>Place</u>	<u>Responsibility</u>
1.		
2.		
3.		
4.		

REFERENCES

Please list four persons (none of which should be related to you), including:

1. A minister of a Christian Church (Disciples of Christ)
2. Chairperson of church board or elders of current congregation
3. A layperson in the Christian Church (Disciples of Christ)
4. A college or seminary professor, or an employer

	<u>Name</u>	<u>Address</u>	<u>Occupation</u>	<u>Telephone</u>
1.				
2.				
3.				
4.				

Please provide each of your references with the Reference Form found in this packet and request them to mail the completed form directly to the regional office.

PURPOSE

Please state your purpose for meeting with the Commission on Ministry:

Please state below any addition information which may be helpful to the Commission on Ministry:

I here by apply to the Commission on Ministry of the Christian Church (Disciples of Christ) in North Carolina for candidacy for the Order of Ministry. It is my desire to remain under care and nurture of the Commission until I have fulfilled all requirements.

Signature _____ Date _____

When complete, please send this form, and all additional information requested to the following address:

Christian Church (Disciples of Christ) in North Carolina
Attn: Commission on Ministry
P. O. Box 1568
Wilson, NC 27894-1568

Please request each of your references to send their reference to the same address.

INFORMATION REQUESTED:

1. Three weeks prior to your first meeting with the Commission on Ministry, provide this application to the Commission on Ministry, completed as fully as possible at that time, and confirm that all your reference forms have arrived at the regional office.
2. Three weeks prior to your first meeting with the Commission on Ministry, provide a typed autobiographical statement of not more than 5-8 pages describing your spiritual journey.
3. A copy of one, or more, of the following:
 - a. a signed Student Information Release Request from your seminary, or other graduate school where you are currently enrolled.
 - b. a copy of your official transcript(s) from college(s), seminary(ies) and/or graduate school(s)
4. Three weeks prior to your second meeting with the Commission on Ministry, provide a typed statement, of not more than 5-8 pages, which clearly states your understanding of the Christian Church (Disciples of Christ). This paper may include history, polity, ecclesiology, and your understanding of the nature of our church.
5. Three weeks prior to your third meeting with the Commission on Ministry, provide a typed statement, of not more than 4 pages, describing your understanding of the vocation of Christian ministry.
6. Three weeks prior to your third meeting with the Commission on Ministry, provide a theological statement, of not more than 3 pages, on what you believe, including your understanding of ordained ministry.
7. Three weeks prior to your final meeting with the Commission on Ministry, provide a typed copy of a sermon you have preached.
8. Additional material, or adjustments to time schedule, may be requested by the Commission on Ministry.
9. By action of the Regional Assembly of the Christian Church (Disciples of Christ) in North Carolina, all ministers with standing are required to complete an approved workshop on clergy sexual misconduct (also called a Boundaries Education workshop).

(Revised March 1, 2007)

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(Revised March 1, 2007)

Christian Church (Disciples of Christ) in North Carolina
COMMISSION ON MINISTRY
Reference Form

Mail: P. O. Box 1568
Wilson, NC 27894

Location: 207 Tarboro St NE
Wilson, NC 27893

Phone: 252.291.4047

E-mail: com@ncdisciples.org
valerie@ncdisciples.org
Baylee.dawn.smith@gmail.com

This form is intended to give the Commission on Ministry insights into the character and gifts for ministry of the candidate who has made application for consideration as a candidate for ordination into the vocation of Christian ministry. Thank you for your willingness to assist the Commission on Ministry in this process.

Name of Candidate _____
(First) (Middle) (Last)

Wavier: I, the candidate, waive the right to review reference responses to this form.

Candidate's Signature: _____

Name of Reference _____

How long have you known this individual? _____

What is your relationship to the candidate? _____

Please comment on the following concerning the candidate (you may use additional space on the back if needed):

(1) Intellectual ability:

(2) Character:

(3) Maturity of judgment:

(4) Emotional stability:

(5) Ability to work with people:

(6) Evidences of Christian faith you have observed in this person's life:

(7) Church involvement you have observed in this person's life:

(8) Other qualities which would affect her or his pastoral leadership in the church:

Do you recommend that we receive this person as a candidate for the Order of Ministry?

Check one: YES _____ NO _____

Name of Reference: _____

Address: _____

Signature: _____

Please return this completed form, and all additional pages you might include in responding, by USPS or E-mail to:

Commission on Ministry
Christian Church in North Carolina
P. O. Box 1568
Wilson, NC 27894

E-mail: com@ncdisciples.org
valerie@ncdisciples.org
Baylee.dawn.smith@gmail.com

NOTE: To persons serving as a reference. Near the top of page one you will see a Waiver statement. Each candidate has the right to sign that waiver or not, as they feel is appropriate. **IF THE WAIVER IS SIGNED**, then the information given by you on this form will be kept in complete confidence. **IF THE WAIVER IS NOT SIGNED**, the candidate will have the right to see this form when completed. We would show it to her or him upon request.

Thank you for your assistance in this important process of calling nurturing and confirming pastoral leaders for the church.

Commission on Ministry