

American Baptist Churches of Metro Chicago

7035 W. Grand Avenue, Suite 102

Chicago, Illinois 60707

Telephone (773) 804-1655 Facsimile (773) 804-1656

APPLICATION FORM AND RECORD FOR ORDINATION CANDIDATES

NAME _____
FIRST MIDDLE LAST (MAIDEN)

PRESENT ADDRESS _____
NUMBER AND STREET

CITY STATE ZIP HOME PHONE _____

CHURCH MEMBERSHIP _____

ADDRESS _____ PHONE _____

PASTOR _____ PHONE _____

MARITAL STATUS _____ SPOUSE'S NAME _____

SPOUSE'S EMPLOYMENT _____

EDUCATIONAL STATUS

Undergraduate School _____ City _____

Degree _____ Major _____ Date _____

Graduate School _____ City _____

Degree _____ Major _____ Date _____

Seminary _____ City _____

Graduation date or projected date _____

Additional _____

-continued-

Please indicate the action taken thus far by your local church toward ordination:

Are you registered with the American Baptist Personnel Service? _____

Have you ever applied for ordination and been refused or asked to wait? Yes ___ No ___
If yes, please give details.

Have you been ordained previously? Yes ___ No ___ Date _____

Ordaining church _____

Address of records _____

Denomination recognizing your ordination _____

Names and addresses of two references other than your pastor:

1. _____	2. _____
_____	_____
_____	_____

Name of person who will accompany you to the interviews:

_____ Phone _____

Address _____



We have read the "Commission on Ordination and Credentials" document.

Candidate's signature _____

Candidate's Current Employment _____

Pastor or church representative's signature _____

Date _____