

APPLICATION FOR PROVISIONAL MEMBERSHIP

WESTERN NORTH CAROLINA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH

(Form also available online at <http://www.wnccumc.org>. click ministries and Board of Ordained Ministry)

FULL NAME: _____ NAME CALLED: _____

DISTRICT _____

PHONE(S): (Residence) _____ (Cell) _____

(Office) _____

MAILING ADDRESS (including city/state/zip): _____

CURRENT E-MAIL ADDRESS: _____

(If you are under appointment, we will most often use your wnccumc.net address. Please be sure you check it regularly.)

DATE OF BIRTH: _____ CITY/STATE OF BIRTH: _____

MARITAL STATUS: ___ Single ___ Married DATE OF MARRIAGE _____

SPOUSE'S FULL (MAIDEN) NAME: _____ DATE OF BIRTH _____

CHILDREN:	FULL NAME	DATE OF BIRTH
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

EDUCATIONAL QUALIFICATIONS (if degree not awarded, indicate number of credit hours):

High School: _____
High School Name and City/State _____ Graduation Year _____

College: _____
College Name, Date Graduated or Dates Attended (mo/yr) _____ Degree or # Credit Hours _____

Graduate School: _____
School Name, Date Graduated or Dates Attended (mo/yr) _____ Degree or # Credit Hours _____

Seminary: _____
Seminary Name, Date Graduated or Dates Attended (mo/yr) _____ Degree or #Credit Hours _____

(If M.Div. or equivalent not yet awarded, give date of expected graduation/completion of educational requirements: _____)

Course of Study: Basic 5-Year Course Completed in _____ (Year)

Number of Courses (_____) and Hours (_____) completed in Advanced Studies

ARE YOU IN THE "ELDER TRACK" _____ OR THE "DEACON TRACK" _____ (check one)?

IF NOT CURRENTLY UNDER APPOINTMENT, OF WHAT LOCAL CHURCH ARE YOU NOW A MEMBER?

(Church/District) _____

IF APPOINTED, LIST CHURCH/CHARGE, DISTRICT, AND CONFERENCE:

SERVICE AS ___ FULL-TIME or ___ PART-TIME LOCAL PASTOR: Number of Years ___ Dates _____

PREVIOUS ORDINATION: Order/Denomination _____ Date _____

Have you ever been dismissed from any job? Yes ___ No ___ If so, from which job, and for what reason?

MILITARY SERVICE: Were you ever on active duty in the military? Yes ___ No ___

Branch	Service from Mo./Yr. to Mo./Yr.	Rank	Type of Discharge	Special Training
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Ever court martialed? Yes ___ No ___ If so, explain: _____

LEGAL: Except for minor traffic violations, have you ever been:

1. Accused of sexual harassment or misconduct? Yes ___ No ___ Explain: _____

2. Formally charged with sexual harassment or misconduct? Yes ___ No ___ Explain: _____

3. Arrested for any violation of law? Yes ___ No ___ Explain: _____

4. Indicted for any violation of law? Yes ___ No ___ Explain: _____

5. Convicted of any violation of law? Yes ___ No ___ Explain: _____

6. A defendant in a criminal proceeding? Yes ___ No ___ Explain: _____

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

Signed _____ Date _____

WE NEED A PASSPORT STYLE OR PROFESSIONAL PHOTOGRAPH OF YOU (only)

Send form and photograph (photograph may be submitted separately) to:
Kim Ingram, Director of Ministerial Services
Board of Ordained Ministry
P.O. Box 18005
Charlotte, NC 28218

APPLICATION IS DUE AUGUST 31, 2013!!!

Download your materials at

Wnccumc.org click ministries, click Board of Ordained Ministry