

## **Pastor Information Form**

Name:		Phone Number:		
ng	g Address:			
	Basic B	iographical Information		
	Date of Birth:	Marital Status:		
	Give a brief summary of your conve	rsion experience.		
	Education: List school, certificate/degree and year obtained (college or higher)			
	School	Certificate/degree	Date	
		language and your proficiency levels.		
	If applicable, explain your spouse's in	nvolvement in your ministry.		
	Do you have children? (Name, age, o	current status)		

## **Professional Experience**

7.	Credential presently held:				
8.	List ministry experience, giving length of service and position. Indicate part-time or full-time. If you are a college/seminary student, give primary experience during field education or other related ministry experience.				
	Church	Position	Dates of Service		
9.	Have you had any experience in pioneering new Assem	nblies? If so, explair	n:		
10.	Have you had any experience in a building program? If	so, explain:			
11.	List any secular work that has helped you in preparation	n for your ministry.			
12.	What cultures (ethnic groups) do you work in best?				

## **Personal Evaluation**

What do y	ou perceive your task as a minister to be?
,	ourself in the following functions of ministry.  (How do you feel about its importance in relationship to your ministry? How characterize your preaching style?)
Teaching:	(What methods do you use? What age group are you best with?)
<u>Evangelism</u>	: (What place does it have in your ministry? What methods have you used?)
Visitation:	(How important do you feel it is in relation to your ministry?)

Counselling: (Evaluate your abilities)	
Administration: (List the types of administr your abilities)	ration in which you have been involved. Evaluate
•	evious question in the order of your competency the least. Estimate the approximate amount of tir
you spend on out	Time Allotment
I	hrs/per week
2	hrs/per week
3	hrs/per week
4	hrs/per week
5	hrs/per week
6	hrs/per week
6  Describe your expectations and philosophy	·
	ne senior pastor or one of the team members.
	ne senior pastor or one of the team members.

	ment briefly on the following items in relationship to yourself.
Progr	ram for continuing education/professional development (include conferences and cours
List tl	he resources you use regularly for enrichment.
What	are the three most significant books you have read?
Do y	ou have any health or physical limitations? Do you require any accommodations?
How	do you maintain your physical health?
How	do you maintain your mental health?
How	do you prefer to spend your leisure time?
	percentage of the time allotted for days off do you take?

What do	you feel is your greatest personal weakness?
If you cou	ld pastor the "Ideal Church", what would it be like in
Worship:	
Evangelisn	n:
Organizat	ional Structure:
List three	things which indicate your greatest satisfaction in your present or most recent minist
List three ministry.	things which indicate your greatest disappointment in your present or most recent
Are there	any practical or theological positions held by the PAOC with which you disagree o

25.	Are you enrolled in the Pension Plan of the PAOC?
26.	Are you enrolled in the PAOC medical plan?: Other?
Referen	ces will be required at a later point if you advance in the hiring process.
Please fe	eel free to enclose a recent photo of yourself (and family too, if possible).
Date: _	
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Signatur	e: