CHRISTIAN CHURCH IN INDIANA NURTURE AND CERTIFICATION

PERSONAL INFORMATION SCHEDULE

DEDCONAL			Today's date				
PERSONAL							
Full name			Se:	x: Male	Female		
Mailing address							
	street		city		zip		
E-mail address			_ Birthd	ate			
Telephone	home: ()	work:		()		
Physical limitat	ions, if any						
Marital status		Number of children At home			good poor		
Present occupat	ion			Ci	ty		
Size of home co		open country		0,000	_10,000 - 50,000		
<u>FAMILY</u>	Name	Date of birth	Occupation		Living?		
Father							
Mother							
Brothers/Sisters	s in family (begin	with oldest and include you	urself)				
1		3	5				
2		4	6				
	Name	Date of birth	Occupation	Highest educa	tion Living?		
Spouse:							
Children:							

CHURCH RELATIONSHIP

Baptize	ed						
•	date	congregation		city	state		
Curren	membership:	Congregation		City	atata		
				City	state		
	Pastor						
	Describe your relationship with this congregation in the last ten years and how you have participated in it.						
	What contact do yo	ou still maintain?					
	List other congrega	ations you have partic	ipated in, with appro	ximate years and descrip	otion of participation.		
What n	ninister or other religi	ious leader has influe	nced you most?				
	How?						
On a se	parate sheet list and	describe volunteer ex	periences you have l	nad in church leadership.	Include following:		
	Worship Board Committees C	Committees Camping Rel.	Sunda Education	y School Soc Regional/General Oth	ial life er		
What e	xperiences in paid lea	adership have you had	l in churches?				
EDUC	ATION						
Summa	rize your schooling t	hus far. Include high	schools, colleges, sp	pecial schools, and gradu	ate schools.		
	Name	City/State	Dates attended	Date of graduation	Degree or # hours completed		
Majors							
Was yo	our course of study in	terrupted while in hig	h school or college?	For how	long?		
	For what reason? _						

What education are you currently pursuing?	
How do you intend to use it?	
What forms of ministry have you considered seriously? List i	in order of preference.
1	3
2	4
RECENT GRADUATES: (During the last one - four years)	
While in your last year of college, did your grades:	improve, remain the same, drop
Please indicate some of your school activities:	
SECOND CAREERS:	
List your work experiences since graduation:	
What is your financial situation; that is, what is your expected and how will you pay for your schooling?	d source of income, primary obligations, major debts,
FUTURE PLANNING As you look ahead, are there any questions, problems, etc., th	
you wish to bring to the attention of Nurture and Certification	personnel?

NC Personal Information August, 2001