



Name:

Date:

The EPC Ministerial Vocation Committee and Office of the Stated Clerk provide resources and advice to both pastors and congregational search committees. To that end, we ask congregations and ministers to complete information forms as an introduction to each other, and as a first step in the process of calling a minister for a congregation. For both the individual pastor and the congregation, this is an opportunity for self-study and for evaluation of current ministry and goals. This calls for honesty, effort, and commitment to open communication.

Ministers and Candidates are welcome to send completed Personal Information Forms to Search Committees for positions in which they have interest. No prior denominational approval is necessary. Completed forms also should be sent to the Office of the General Assembly at the address below, in care of the Stated Clerk. Candidates Under Care of presbyteries are required to submit a completed Personal Information Form before written ordination examinations are issued.

For those seeking to transfer ordination credentials to the EPC, see the information on the EPC website at www.epc.org/transferringtotheepc before filling out this form.

If you need additional space to answer any questions, attach a separate sheet (ensure that the question number is included).

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EPC Office of the General Assembly

5850 T.G. Lee Blvd., Suite 510
Orlando, FL 32822

(407) 930-4239
(407) 930-4247 (fax)
info@epc.org
www.epc.org

Name:

Part 1: Statement of Consent*

We are called to honesty and a commitment to open communication as we seek to build the body of Christ. In that spirit, we ask that you confirm your agreement to the following statements by your signature below:

I attest that the information contained in my Personal Information Form is true and complete to the best of my knowledge.

I authorize the persons and entities, such as members of search committees of a prospective calling body or appropriate staff persons, to make inquiries regarding all statements contained in my Personal Information Form. I also authorize all persons referred to as references, members of congregations I have served or personal/professional colleagues, to supply verification of the information provided in the Personal Information Form. I understand that such persons may comment on and state their opinions regarding all matters addressed in the profile including, without limitation, my background and character. To encourage such persons to speak openly and responsibly, I hereby release them from any claims or liabilities arising from their responses and comments if made in good faith and without malice.

I authorize staff of the Office of the Stated Clerk to circulate, distribute, and otherwise share information gathered in connection with my Personal Information Form to representatives of calling bodies. I hereby release the Evangelical Presbyterian Church, its agencies, and all contractors or employees of the Evangelical Presbyterian Church or its agencies from any claims or liabilities in connection with the Personal Information Form or its distribution.

I understand that I may receive copies of all written information which is submitted to the Office of the Stated Clerk in connection with the Personal Information Form, if I make a request in writing. I may submit additions to my file to supplement or reply to any matters included in my file.

*A copy of this consent form will be available to reference sources.

Signature: _____ Date Signed:
Printed or Typed Name:

I am able to consider a call at this time: Yes No Possibly

It is unlikely I will consider a call before:

Name:

Part 2: Personal Information

1. Name:

(Last)

(First)

(Middle)

Preferred Address:

Preferred Phone:

Cell Work Home

Alternate Phone:

Cell Work Home

Email:

2. Work History:

Current and Previous Positions (ministry or otherwise)

Dates

Name:

3. Volunteer Experience (applicable to a pastoral role)

Dates

4. Ordination Status

Ordained by (church/city/state):

Ordination Date:

If not ordained:

Church Membership (church, city, state):

Candidate Under Care of (denomination and presbytery):

since (date):

Name:

5. Educational Background:

a. Name of Institution	Dates Attended	Degree
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b. Continuing Education/Professional Development	Dates
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6. Other Experience:

a. Types of professional supervision and personal accountability you have found helpful in your life and ministry:

Name:

b. Community and Civic Activities:

c. Presbytery and General Assembly Activities:

d. Ecumenical Activities:

e. Special Interests, Hobbies:

f. Languages (other than English) you can speak, and level of proficiency:

Name:

Part 3: Narrative

- 1. Life Story:** In one page, describe your life's journey. Include key incidents (such as how you came to faith in Christ) that were significant in your formation as a person and your call to ministry.

Name:

2. Self-Appraisal:

a. Briefly describe your leadership style:

- How you go about making decisions:

- Your administrative style:

b. Talk about how you handled a recent conflict. What did you do well? What areas of conflict resolution do you need to be more effective at?

c. What do you enjoy about working as part of a team? What is challenging to you?

Name:

d. Briefly describe your worship preferences: (*preaching style, preferred worship style [e.g., liturgical, modern, traditional, blended, etc.]*)

e. Share your sense of your call to ministry:

- What type of ministry role are you called to? And what would effectiveness look like in that role?

- What are your personal ideals and long-term goals?

Name:

3. Views:

a. What opportunities do you see for the church to reflect the reality of Christ's Kingdom in our present context?

b. What are your views on charismatic expression in worship?

c. What are your views on women in ordained office?

d. What are your views on human sexuality and gender?

Name:

Part 4: Denominational Alignment

1. Do you affirm the “Essentials of Our Faith” without exception? Yes No

If “No” please briefly explain:

2. Do you agree with and can you submit to the system of government of the Evangelical Presbyterian Church? Yes No

If “No” please briefly explain:

3. Do you sincerely receive and adopt the *Westminster Confession of Faith and Catechisms* of this Church as containing the system of doctrine taught in the Holy Scriptures? Yes No

If “No” please briefly explain:

4. Do you take any exceptions to the *Westminster Confession of Faith and Catechisms*? Yes No

If “Yes,” identify the topic with chapter, paragraph, or question number you take your exception with. State your alternate view with biblical support. Include additional page if necessary.

(An “exception” means that you disagree with a statement in the Westminster Confession, believe it to be wrong, have Scriptural support to justify your belief, and have Scriptural support of an alternative view.)

5. Do you willingly offer the sacrament of infant baptism to Christian parents? Yes No

If “No” please briefly explain:

Name:

Part 5: Ministry Preferences and History (check all that apply)

<i>Size of Church</i>	<i>Would Serve</i>	<i>Have Served</i>
Up to 149 members	<input type="checkbox"/>	<input type="checkbox"/>
150 to 299 members	<input type="checkbox"/>	<input type="checkbox"/>
300 to 499 members	<input type="checkbox"/>	<input type="checkbox"/>
500 to 999 members	<input type="checkbox"/>	<input type="checkbox"/>
1,000 members	<input type="checkbox"/>	<input type="checkbox"/>
Position Type		
Pastor (Solo)	<input type="checkbox"/>	<input type="checkbox"/>
Pastor (Head of Staff)	<input type="checkbox"/>	<input type="checkbox"/>
Staff Ministry		
Associate	<input type="checkbox"/>	<input type="checkbox"/>
Assistant	<input type="checkbox"/>	<input type="checkbox"/>
Congregational Care	<input type="checkbox"/>	<input type="checkbox"/>
Education	<input type="checkbox"/>	<input type="checkbox"/>
Outreach	<input type="checkbox"/>	<input type="checkbox"/>
Youth	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Chaplaincy	<input type="checkbox"/>	<input type="checkbox"/>
Church Planting	<input type="checkbox"/>	<input type="checkbox"/>
Tentmaking	<input type="checkbox"/>	<input type="checkbox"/>
Temporary		
Occasional Supply	<input type="checkbox"/>	<input type="checkbox"/>
Stated Supply	<input type="checkbox"/>	<input type="checkbox"/>
Transitional Supply	<input type="checkbox"/>	<input type="checkbox"/>
World Missions	<input type="checkbox"/>	<input type="checkbox"/>
Home Missions	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Community Type		
Rural (Country/Farming)	<input type="checkbox"/>	<input type="checkbox"/>
Suburban	<input type="checkbox"/>	<input type="checkbox"/>
Town/Village	<input type="checkbox"/>	<input type="checkbox"/>
Urban (Metropolitan)	<input type="checkbox"/>	<input type="checkbox"/>
Urban (Inner City)	<input type="checkbox"/>	<input type="checkbox"/>
College/University	<input type="checkbox"/>	<input type="checkbox"/>
Multi-Cultural	<input type="checkbox"/>	<input type="checkbox"/>
Ethnic (Specify:)	<input type="checkbox"/>	<input type="checkbox"/>
Geographic Areas		
U.S. West	<input type="checkbox"/>	<input type="checkbox"/>
U.S. Midwest	<input type="checkbox"/>	<input type="checkbox"/>
U.S. South	<input type="checkbox"/>	<input type="checkbox"/>
U.S. East	<input type="checkbox"/>	<input type="checkbox"/>
U.S. Middle Atlantic	<input type="checkbox"/>	<input type="checkbox"/>
U.S. Southeast	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

Name:

Part 6: References

Choose five individuals to complete the written reference form at the end of this form and who are willing to be contacted by phone by a Search Committee and a Presbytery Ministerial Committee. If possible, one of these references should represent your current/last congregation's Session. When providing the form to your references, include a stamped envelope addressed to the EPC Office of the General Assembly (address on page 1).

1. Name:

Address:

E-mail:

Preferred phone:

Person's relationship to you:

2. Name:

Address:

E-mail:

Preferred phone:

Person's relationship to you:

3. Name:

Address:

E-mail:

Preferred phone:

Person's relationship to you:

4. Name:

Address:

E-mail:

Preferred phone:

Person's relationship to you:

5. Name:

Address:

E-mail:

Preferred phone:

Person's relationship to you:

Name:

Part 7: Background Disclosure

To the person completing these statements:

Congruent with the concern for ethical performance of ministry in the Evangelical Presbyterian Church and openness about issues that are sensitive to functioning in the public role of a pastor in a congregation, you are asked to respond to the following statements. There is opportunity for explanation if you so desire.

To the Search Committee or Session of a calling church:

Any practice of routinely rejecting profiles on a perfunctory basis without a complete and thoughtful review of the explanations offered by the candidate is strongly discouraged. The information presented here is meant to provide an occasion for open, honest dialogue.

This disclosure statement will only be shared by the Office of the General Assembly with an interested congregation and the Ministerial Committee as part of the search process.

1A. Have you ever been the subject of official discipline by a Session or Presbytery of the Evangelical Presbyterian Church?

Suspended Yes No

Deposed Yes No

1B. Is any official disciplinary action currently pending?

Yes No

1C. Have you ever been the subject of official disciplinary proceedings by another denomination that resulted in disciplinary action?

Yes No

1D. Are any official disciplinary proceedings by another denomination currently pending?

Yes No

Explanation of 1A-1D:

2A: Has a civil lawsuit, criminal charge, or official ecclesiastical complaint been sustained against you for sexual discrimination, harassment, exploitation or misconduct, physical abuse, child abuse, or financial misconduct?

Yes No

Name:

2B. Have you ever been convicted of a felony?

Yes No

Explanation of 2A-2B:

3A. Has your employment ever been changed because you attempted or actually engaged in:

- A. Sexual Discrimination, Harassment, Exploitation, or Misconduct Yes No
B. Physical Abuse Yes No
C. Child Abuse Yes No
D. Financial Misconduct Yes No

3B. Has your employment ever been changed in order to avoid facing or to avoid being terminated because of charges of actual or attempted:

- A. Sexual Discrimination, Harassment, Exploitation, or Misconduct Yes No
B. Physical Abuse Yes No
C. Child Abuse Yes No
D. Financial Misconduct Yes No

Explanation of 3A-3B:

I recognize that presbyteries are required to perform a background investigation on all individuals seeking candidacy or membership. I further recognize my responsibility to update this background disclosure in a timely manner should there be a change of status in any of the issues named above.

Signature: _____ Date:

Type or print your name: