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| The Evangelical Covenant Church  Covenant Minister’s Profile Form the Department of the Ordered Ministry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Personal History** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last name | | | | |  | | | | | | | | | | | | | First | | | |  | | | | | | | | | | | | | Middle | | | |  | | | | | | | | Date of Birth | | | | | | | |  | | |
| Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | |  | | | | | | | | | | | | | | | | | | | | | | | | | | State/Pr. | | | | | | | | |  | | | | | Postal Code | | | | | | | | |  | | | | | | |
| Home Phone | | | | | | | |  | | | | | | | | | Office Phone | | | | | | | | ­ | | | | | | | | | | | | | | | | | Mobile Phone | | | | | | |  | | | | | | | | |
| Email | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| Marital Status | | | | | | | | | Single | | | | | | Married | | | | | | | | | Date of Marriage | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | |
| Spouse Name (maiden if applicable) | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| Children’s Names and Birth Dates: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Church History** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Denominational Background | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Years in Covenant | | | | | | | | |  |
| Baptism | | | | | | a) Date | | | |  | | | | b) Congregation and Denomination | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ministerial Credentials** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Check the box next to your current license or permanent credential* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Licensed | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |  | | | |
|  | | | *If licensed, check type of license currently held* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | License for Pastoral Office (LPO) | | | | | | | | | | | | | | | | | | Local Ministry License (LML) | | | | | | | | | | | | | | | | | | | License for Theological Students (LTS) | | | | | | | | | | | | | | | | | |
|  | | | License for Consecrated Missionaries (LCM) | | | | | | | | | | | | | | | | | | | | | | | | Lay Minister’s License (LAY) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Commissioned | | | | | | | | | | | | | | | |  | | | Year of Commissioning | | | | | | | | | | |  | | | | | | | | | | Specialty: | |  | | | | | | | | | | | | | | |
|  | Ordained to Specialized Ministry | | | | | | | | | | | | | | | |  | | | Year of Ordination | | | | | | | | | | |  | | | | | | | | | | Specialty: | |  | | | | | | | | | | | | | | |
|  | Ordained to Word and Sacrament | | | | | | | | | | | | | | | |  | | | Year of Ordination | | | | | | | | | | |  | | | | | | | | | |  | |  | | | | | | | | | | | | | | |
|  | Transfer of Ordination from | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | to the ECC | | | | | |
|  | | | Date of Provisional Ordination | | | | | | | | | | | | | | | |  | | | |  | | | | | | Date of Finalization of Transfer | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | |
| **Educational History** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **College/University/Seminary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Major Field** | | | | | | | | | | | | | | | | | | **Degree** | | | | | | **Year** | |
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| **Continuing Education:** *List the three most significant educational experiences in the last five years* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Course of Study** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Organization Offering Course** | | | | | | | | | | | | | | | | | | | | | | | **Year** | |
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| Name:  Page 2    Page 2 | | | | | | |
| **Employment History** | | | | | | |
| *List up to the last seven positions of employment held; begin with the most recent position* | | | | | | |
| **Church/Institution/Business, Location** | | **Position Held** | **From Year** | | **To Year** | |
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| **Denominational & Community Involvement** | | | | | | |
| *List up to five significant ways of involvement in the last five years: Boards, Commissions, Committees, Ecumenical, Etc.* | | | | | | |
| **Type of Involvement** | | | | **From Year** | | **To Year** |
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| **Spiritual Journey** | | | | | | |
| *Describe the following in the provided space* | | | | | | |
| **Your Conversion and Spiritual Pilgrimage:** | | | | | | |
|  |  | | | | | |
| **Your call to Ministry:** | | | | | | |
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| Name: Page 3 | |
| **Theological Perspective** | |
| *The six Covenant Affirmations are: 1 )the centrality of the Word of God, 2) the necessity of the new birth, 3)a commitment to the whole mission of the church, 4) the church as a fellowship of believers, 5) a conscious dependence on the Holy Spirit, 6) the reality of freedom in Christ. Within the provided space, reflect on ways the affirmations influence your ministry in the local church.* | |
|  |  |
| **Perspectives on Pastoral Ministry** | |
| *Describe the following in the provided space* | |
| **Your theology and practice of worship:** | |
|  |  |
| **Philosophy of leadership and team ministry:** | |
|  |  |
| **Your primary spiritual gifts for pastoral leadership:** | |
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| Name: Page 4 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Perspectives on Pastoral Ministry** (Continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Reflect on the different church and community cultures you have experienced:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Comment on life circumstances that might affect the call process for you (i.e., spouse’s occupation, health, etc.):** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Pastoral Preferences** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Preference Continuum:** *Indicate your* ***preferences*** *on this continuum with* 1 *being the lowest (or least frequent/preferred) and* 10 *being the highest (or most frequent/preferred). You may write an explanatory note in the provided space.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | **Least** | | **1** | **2** | | **3** | | **4** | | **5** | | **6** | | **7** | | **8** | | **9** | | **10** | | **Most** |
| **Worship Style** | | | | | | Contemporary | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
|  | | | | | | Traditional | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sermon** **Style** | | | | | | Thematic | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
|  | | | | | | Expository | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sermon** **Text** | | | | | Lectionary of Christian Year | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
|  | | | | | | Series | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Charismatic** **Movement** | | | | | | | Knowledge of |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
|  | | | | | | Involvement In | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Evangelism** **Style** | | | | Intentional Strategy/Planning | | | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
|  | | | Natural Outcome of Giftedness | | | | |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | |

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| Name: Page 5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Pastoral Preferences** (Continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Preference Continuum:** *Indicate your* ***preferences*** *on this continuum with* 1 *being the lowest (or least frequent/preferred) and* 10 *being the highest (or most frequent/preferred). You may write an explanatory note in the provided space.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | **Least** | | | | **1** | **2** | | **3** | **4** | | **5** | | **6** | | | **7** | | **8** | **9** | | **10** | **Most** | |
| **Compassion and Justice** | | | | | | | | | Interest | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
| **Ministries** | | | | | | | | | Involvement | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ministry** **Focus** | | | | | | | | Discipleship/Equipping | | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
|  | | | | | | | | Community Outreach | | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Theology of Baptism** | | | | | | | | Believer | | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
|  | | | | | | | | Infant | | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Practice of Baptism** | | | | | | | Believer | | | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
|  | | | | | | | Infant | | | | | |  |  | |  |  | |  | |  | | |  | |  |  | |  |  | |
| *note:* | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Note: Covenant pastors must agree to recognize the baptism of infants and adults as valid. In order to serve the entire church, pastors in the ECC are required to practice both modes of the sacrament.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ministry Preferences** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Rank the following positions from 1 to 10 (1 being highest) according to which positions you feel most suited* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Lead Pastor | | | Christian Education/Christian Formation | | | | | | | | | | | | | | Children | | | | | | | | Youth | | | |
|  | | | Adult | Administration | | | | | | | Community Outreach/Development | | | | | | | | | | | | | | Worship Leader | | | | | | |
|  | | Chaplain-Military | | | | | | | | Chaplain-Institutional | | | | | Other: | | |  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Those applying for Ministerial Credentials:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I have signed the Background Check and Release Form:  Yes  No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I have signed the Policy on Baptism of the Evangelical Covenant Church:  Yes  No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I have completed the appropriate forms for the Secure Point Criminal Record Screening:  Yes  No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I received my theological degree from NPTS , or have enrolled in one of the following programs: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Residential Orientation at NPTS | | | | | | | | | | | Covenant External Orientation | | | | | | | | | | | CHET Orientation | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Signature: | | | |  | | | | | | | | | | | | | | | | | Date: | | | |  | | | | |  |
| *If submitting form via email, type name above* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Return to the Department of the Ordered Ministry, 5101 North Francisco Avenue, Chicago IL, 60625-3611  Phone: 773-583-3211, Fax: 773-583-3292, Email: ministry@covchurch.org, Web: www.covchurch.org  form revised 1/25/2006 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |