Congregational Care Minister Application

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Active CCUMC Participation since (year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a CCUMC screened adult eligible to work with minors? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Areas of Involvement with CCUMC or Community

Past Areas of Involvement with Previous Congregations or Community

Have you completed any of the following courses or workshops: Alpha, Disciple, Stephens Ministry, or Walk to Emmaus? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you had any other spiritual training you’d like to share with us?

What spiritual practices do you find helpful for your walk with Christ? List two to three things in your faith/life story that are defining moments for you? These could be positive or negative experiences.

Reflect on a time in your life when you went through a challenging experience. This could be a personal experience or something you went through with a loved one. How did God and the support of others see you through this experience? How might God use your experience to help others?

Why do you want to become a congregational care minister?

Please return this application to Pastor Lisa’s mailbox in the church office by 3/26/25.