

FIRST BAPTIST CHURCH OF MARSHALL HEIGHTS

Reaching People
Restoring Lives
Reclaiming Community



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PASTOR APPLICATION FORM

PERSONAL INFORMATION		DATE
Name _____		
Present address		
Last First		
Street City		State/Zip code
How long / /		Birth Date
Telephone: Home () _____ Business () _____ Cell () _____		
Email address: _____ Personal website address (if available): _____		
If hired, can you present proof of your legal right to live and work in this country? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, how long in the US?		
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Single		
If Married, Name of Spouse:		
Names and Ages of Children:		
Have you been baptized by immersion? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If you have not been baptized by immersion, would you consider being baptized by immersion? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Please enclose a copy of your ordination certificate, call to the ministry experience, and doctrinal statement. Indicate any changes in your beliefs or views since that time.

ORDINATION

What year were you ordained? _____ What church requested your ordination? _____

Are there any changes in your ordination status? ☐ No ☐ Yes If yes, explain: Have you ever been censured by a denomination or church? ☐ No ☐ Yes If yes, when? _____

Explain:

Have your ordination credentials ever been withdrawn or revoked? ☐ No ☐ Yes If yes, when? _____
Explain:

What group (denomination, fellowship or church) now holds your ordination credential?

HAVE YOU EVER FILED BANKRUPTCY? ☐ No ☐ Yes If yes, please state the nature and circumstances:

HAVE YOU EVER BEEN CONVICTED OF A FELONY? ☐ No ☐ Yes

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

EDUCATIONAL BACKGROUND				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NO. OF YEARS COMPLETED	MAJOR & DEGREE
College/University				
Vocational or Technical School				
Graduate School				
Other				
Additional Academic Experience (post-secondary) Please list courses attempted and whether or not completed; P/T or F/T; dates; institutions and awards received.				
Clinical (medical–psychology) Pastoral Education Have you completed a unit in clinical pastoral education (CPE)? If so, please provide Contact information _____ _____ _____				
<i>[If you answer "Yes" to any of the questions in the following section, please attach a separate sheet indicating the nature of the suit, offense, date, court, and disposition or other appropriate explanation. A conviction record will not automatically be a bar to employment. Factors such as your age at the time of the crime, seriousness, and nature of the violation, the time elapsed since the crime, job-relatedness, and subsequent rehabilitation will be considered.]</i> Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer? <input type="checkbox"/> No <input type="checkbox"/> Yes Has any employer ever subjected you to disciplinary action, suspended, terminated, or asked you to leave a job or volunteer position on the grounds of any unlawful sexual behavior, or violation of an employer's sexual misconduct or harassment policy? <input type="checkbox"/> No <input type="checkbox"/> Yes Have you ever been charged in civil or criminal proceedings with improprieties regarding children? <input type="checkbox"/> No <input type="checkbox"/> Yes Have you ever entered a plea of guilty, a plea of "no contest" (nolo contendere), or has any court ever deferred further proceedings without entering a finding of guilty and placed you on probation or in a public service or education program for any crime other than a minor traffic offense? <input type="checkbox"/> No <input type="checkbox"/> Yes Have you ever been suspended, discharged, or resigned instead of discharged from any position? <input type="checkbox"/> No <input type="checkbox"/> Yes				

WORK EXPERIENCE	
Work Experience Please list your work and/or ministry experience for the past five years , beginning with your most recent job held. If you were self-employed, give the firm name. Attach additional sheets if necessary.	
Name of employer:	Name of your last supervisor:
Address:	Employment dates
Phone #:	From: To:
Your last job title:	
Reason for leaving (be specific):	
May we contact this employer for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Name of employer:	Name of your last supervisor:
Address:	Employment dates
Phone #:	From: To:
Your last job title:	
Reason for leaving (be specific):	
May we contact this employer for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Name of employer:	Name of your last supervisor:
Address:	Employment dates
Phone#:	From: To:
Your last job title:	
Reason for leaving (be specific):	
May we contact this employer for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Name of employer:	Name of your last supervisor:
Address:	Employment dates
Phone #:	From: To:
Your last job title:	
Reason for leaving (be specific):	
May we contact this employer for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO	

REFERENCES

Do not include family members or relatives for references.

Give three references that are qualified to speak of your spiritual experience and Christian service. List your current pastor first.

NAME	COMPLETE ADDRESS	COMPLETE PHONE #	POSITION

Give three references who are qualified to speak of your professional training and experience. List your current or most recent supervisor first.

NAME	COMPLETE ADDRESS	COMPLETE PHONE #	POSITION

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

Please read carefully, initial each paragraph, and sign below

Initials	I certify that all the information in this application is accurate and complete to the best of my knowledge, and I have not knowingly withheld any information that might adversely affect my prospects for employment.
Initials	I understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.
Initials	I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with First Baptist Church of Marshall Heights creates an actual or implied contract of employment.
Initials	After THE CALL from the Chairman of Deacons, I understand that if I accept employment with First Baptist Church of Marshall Heights, it will be on an at-will basis. This means that before Installation, either First Baptist Church of Marshall Heights or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

Signature of applicant _____ Date: _____

PERSONAL QUESTIONS

1. What do you consider your ministerial management style to be?
2. Tell us about your call to be a preacher.
3. What are your goals in ministry?
4. Why is the Gospel of Jesus good news to you personally? Are there events or changes in your life that you directly attribute to the work of the Holy Spirit?
5. What are or would be your strengths and weaknesses as a pastor?

PRACTICAL QUESTIONS

1. What do you think the pastor's role should be in a congregation's life?
2. What would be your first step as our pastor?
3. What areas of ministry have you found frustrating and/or difficult?
4. What do you see as the pastor's role in counseling, ministry to youth, ministry to seniors, and ministry to singles?
5. How do you balance leading the spiritual and devotional life of the congregation with the administrative and business affairs of the church?

Please attach a theological statement of faith that addresses at least the following: nature and accuracy of scripture, nature and history of the resurrection, nature of salvation, meaning of baptism, and meaning of the Lord's Supper.