

# Initial Interview Information Form

Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Ministry Interest (check one):  
\_\_\_\_\_ Ordained Ministry, Elder  
\_\_\_\_\_ Ordained Ministry, Deacon  
\_\_\_\_\_ Ordained Ministry, Endorsed Clergy  
\_\_\_\_\_ Licensed Local Pastor  
\_\_\_\_\_ Certified Lay Ministry (CLM)  
\_\_\_\_\_ Other; please specify:  
\_\_\_\_\_

Home Church \_\_\_\_\_ Years of membership there \_\_\_\_\_

Pastor \_\_\_\_\_ Church phone # \_\_\_\_\_

Date of approval from Home Church SPRC \_\_\_\_\_

Date of initial meeting with Wilmington District Superintendent \_\_\_\_\_

In addition to the information above, please submit to the registrar at your earliest opportunity:

- 1) your resume
- 2) your call statement
- 3) your response to Book of Discipline questions in paragraph 310.2a

**Thank you for your time and interest. We look forward to meeting you!**