



**PRESBYTERY DE CRISTO
Committee on Ministry**

Application for Validated Ministry

Date: _____

Personal Information

Name: _____

Address: _____

City/State/Zip: _____

Contact Phone Numbers: _____

Email Address: _____

Employer Information

Employer: _____

Address: _____

City/State/Zip: _____

Contact Phone Numbers: _____

Are you currently a PCUSA ordained Minister of Word and Sacrament?

() No () Yes Ordained what year? _____

What Presbytery are you an active member in? _____

Please list your formal education. Please include dates, institution and degrees.

What **Ecclesiastical Designation** are you requesting? (Please mark)

- | | |
|--|---|
| <input type="checkbox"/> Service at General Assembly Level | <input type="checkbox"/> Pastoral Counselor |
| <input type="checkbox"/> Service at the Synod Level | <input type="checkbox"/> Campus Minister |
| <input type="checkbox"/> Service at the Presbytery Level | <input type="checkbox"/> Missionary |
| <input type="checkbox"/> Parish Associate | <input type="checkbox"/> Partner in Mission |
| <input type="checkbox"/> Teachers | <input type="checkbox"/> Evangelists |
| <input type="checkbox"/> Chaplains | <input type="checkbox"/> Administrators |
| <input type="checkbox"/> Social Workers | <input type="checkbox"/> Consultants |
| <input type="checkbox"/> Member at Large (Describe): _____ | |

Participation

Within which local PCUSA congregation will you be active? _____

In what ways will you participate in the life of that Congregation?

In what ways will you participate in the life of the Presbytery de Cristo?

Other Participation

What other ecumenical / ecclesiastical / religious activities might you engage in? i.e. weddings, funerals, ecumenical worship etc.

Validated Ministry

Please describe how your proposed ministry conforms to the mission of God's people in the world as set forth in Scripture, the Book of Confessions and the Book of Order?

Describe how your proposed ministry or pastoral care serves and aids others, and enables the ministries of others.

Will the organization that you are going to work for have a supervisory structure that encourages and monitors your professional development? Please describe.

How will you reconcile any differences between the mission and scope of the organization if that mission and scope differ with the reformed theology as set forth in the Book of Confessions and the Book of Order?

APPLICATION FOR VALIDATED MINISTRY

I certify that I know the contents of this application signed by me and the statements in the application are a true and correct representation of my proposed Ministry activities for a validated ministry.

Signature

Name: _____