

**CERTIFIED LAY MINISTER
BIOGRAPHICAL INFORMATION FORM
Dakotas/Minnesota Annual Conferences**

PERSONAL DATA

Full Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Gender: _____ Date of Birth: _____ Age: _____

Ethnic Background: _____ Race: _____

MARITAL STATUS (circle one)

Single Engaged Married Separated Divorced Remarried Widowed

FAMILY DEPENDENTS

Please list any dependents you have: _____

EDUCATION

High School: _____ Year of Graduation: _____

Post-High School Education: _____

Completion of Program or Degree? _____ Year of Completion: _____

EMPLOYMENT

Place of Employment: _____ Employment Date: _____

RELIGIOUS BACKGROUND

Please describe your religious background, including current church activities:

INTEREST IN MINISTRY

Why do you wish to become a Certified Lay Minister? _____

Are you currently a Certified Lay Servant (Leader)? _____

Recent classes you have taken: (Please give the name of the class and the instructor, and the year in which it was taken.)

Please list your top five spiritual gifts:

What do you believe to be your greatest strengths and weaknesses for ministry?

Signed: _____ Date: _____

Revised 08/2012
