

CLERGY PROFILE FORM

Name: _____ Nickname: _____
 (Last) (First) (Middle)

Appointment: _____

Charge/Office Mailing Address: _____
 (Street) (City) (Zip)

Office Phone: _____ Office Email: _____

Church/Charge Fax: _____ Church/Charge Website: _____

Parsonage/Home Address: _____
 (Street) (City) (Zip)

Home/Parsonage/Contact phone number for Journal Clergy Directory: _____

I live in the parsonage I live in my own home Date of Birth: _____ Sex: M F

I prefer to receive Conference mailings at my parsonage/home charge/office address.

Home Town: _____ Home Church: _____

Father's Name: _____ Mother's Name: _____

Ethnicity: _____ Languages: _____

Marital Status: _____ Spouse's Education _____

	Date	Spouse (include maiden name if applicable)	Birth Date	Employment
Married				
Widowed				
Divorced				
Separated				

(List additional marital information on a separate piece of paper.)

Children:			
Last Name	First Name	Birth Date	Death Date

Status History	Date	Conference Name
Declared Candidate		
Certified Candidate:		
Completed Licensing School		
Licensed Local Pastor		
Probationary/Provisional Elder/ Deacon Commissioned		
Elder in Full Connection		
Deacon in Full Connection		
Associate Member		
Diaconal Minister		
Retired		
Other		

Recommending Church: _____

Prior Denomination: _____ City Prior Denomination: _____ State: _____

Educational History:

Level	School Name	Graduation Date	Degree
High School			Diploma/GED
College			
Seminary			
Graduate			
Doctorate			
Other			

Clinical Training:

Name of Institution	
Location: City & State	
Beginning Date	
Ending Date	
Certification	Yes <input type="checkbox"/> No <input type="checkbox"/>

Former Employment (<i>Position/Description</i>)	Location (<i>Company, City, State</i>)	From	To

I serve on the following committees:

Susquehanna Conference Administrative/Program Agencies	District Committees

Hobbies/Volunteer Work:

Awards/Commendations/Recognitions Received:

Pastor Service Record

From	To	Conference	Charge Served	Position	Status (FL, FE, etc.)

Signed: _____ **Date:** _____

Please return to the office of the Bishop:
Office of the Bishop
303 Mulberry Drive Ste 100
Mechanicsburg PA 17050-3198