Date:	Date:	
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Application to be Enrolled by Presbytery as a Candidate

Name of applicant:			
(family)	(first)	(middle/natal)	
Current address:			
(street)	(city)	(state)	(zip)
Main phone:	Alt phone:		
(h/o/n	1)		(h/o/m)
Email:			
Email:			
Permanent address:			
(if same, write 'same') (street)	(city)	(state)	(zip)
Current church membership:			
•	(name of church)		
Church address:			
Church address:(street)	(city)	(state)	(zip)
Doto onrolled as an inquirer			
Date enrolled as an inquirer:			
In what church occupation are you interested in at t	his time?	ninister, mission worker, educ	
	(e.g. pastor, youth t	ninister, mission worker, eauc	cator)
Present or most recent school attended:			
Location:	Date of graduation:		
Location.	Date of graduation.		
.			
Inquir	er's Statement		
hereby apply to be enrolled by	(presbytery name)	as a candidate.	
	(presbytery name)		
I certify no civil, criminal, ecclesiastical co	mplaint has ever been sustaine	ed or is nending against	me
1001012/ 100 01/11, 011111111111, 000100110111 000	mpiumi nuo ever occir osciumi	or to posturing against.	
I am unable to make the above certification		nent a description of the	•
complaint and/or outcome of the situation v	with explanatory comments.		
certify that the above statement and other informat	ion in this application are true	and correct. If recomm	andad ta
e a candidate for the ministry of Word and Sacram			
liligently and wholeheartedly with the session and p			
ny preparation.	• •		
nquirer's signature:			
aquiror o digitaturo.			(date)
			•

Date:	Name:			•
	References for	r Outcomes of Inquiry		
Name:	(family)	(first)	(middle/natal)	
		(Jirsi)	(miaaie/naiai)	
Current address:	(street)	(city)	. (state)	(zip)
Main phone:		Alt phono:		,
iviam phone	(h/o/m)	Ant phone.		(h/o/m)
Email:		•		
In what capacity	have you worked with this person?			
Name:	(family)	(first)	(middle/natal)	
		• ,	(maaic/naias)	
Current address:	(street)	(city)	(state)	(zip)
Main phone:	(h/o/m)	Alt phone:		
F	(h/o/m)			(h/o/m)
Email:				
In what capacity	have you worked with this person?		3	
Name:	(family)	(first)	(middle/natal)	
Current address:				٠
	(street)	(city)	(state)	(zip)
Main phone:	Management and the second seco	Alt phone:		*****
	(h/o/m)	•		(h/o/m)
Email:				
In what capacity	have you worked with this person?			······································

Review and prepare any specific materials your presbytery may require as "outcomes of inquiry," and submit them along with this application.

If the presbytery requires a formal endorsement from the session for advancement to candidacy, have the clerk submit a Form 5B.