

Application Form

Applicant Name _____

Address _____

Age _____

Phone Number _____

Email Address _____

Pastor Name _____

Church Name _____

Church City and State _____

Conference _____

Are you a Seventh-day Adventist? *T or F* _____

How long have you held a church office? _____

Are you a member in good and regular standing? _____

How would you rate your temperament from 1-10? _____

Are you a college graduate? _____

Are you committed to being a disciple or a church member? *Circle one.*

Are you gainfully employed, retired, etc.? _____

Applicant Signature

Date