

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Position(s) of Interest (Check all that apply):

Senior Pastor \_\_\_ Associate Pastor \_\_\_

Education/Administration \_\_\_ Music \_\_\_

Youth \_\_\_ Children \_\_\_

Other \_\_\_

### PASTORAL CANDIDATE QUESTIONNAIRE

Conversion Experience:

Highlights of Your Christian Growth:

Briefly Share Your Call to Ministry:

What Do You Consider to be the Specific Gifts Which the Holy Spirit has Equipped You with to Fulfill Your Ministerial Call?

How Actively Involved Will You be in the Association and How Active Would You Like the Church you Serve to Be?

Please Prioritize the Following Functions in Relation to Your Own Ministry with #1 Being Your Highest Priority:

Administration

Counseling

Evangelism

Leadership

Preaching

Teaching

What Do You Consider Your Greatest Strength in Ministry and Your Greatest Weakness?

Describe Your View of How The Church Should Minister to the Needs of:

The Children of the Church and Community

The Youth of the Church and Community

The Young Adults of the Church and Community

The Adults of the Church and Community

The Senior Adults of the Church and Community

What Do You Feel in the Role of the Following:

Worship

Deacons

Music

Deacons

Missions Education Organization (WMU, Brotherhood, etc.)

Christian Education (Sunday School, Discipleship, etc.)

Church Fellowship

Evangelism

I affirm the answers given are accurate and truthful.

Signature:

Date: