

## APPLICATION FOR ORDINATION

PLEASE TYPE OR PRINT LEGIBLY

Return this application and requested information to:

CHRISTIAN CHURCH IN KENTUCKY

1125 Red Mile Rd

Lexington, KY 40504

Phone (859) 233-1391

Date of Application\_\_\_\_\_

### TO BE SUBMITTED WITH THIS APPLICATION:

- I. A. A statement from the seminary dean or other responsible person indicating that you are expected to complete the requirements for the M.Div. degree or its equivalent prior to the projected date of ordination.
- B. A statement from the petitioning congregation indicating that by official vote it has approved the ordination subject to the approval of the region of Kentucky.
- II. A five page paper discussing your systematic theology and ecclesiology. Include a statement of your understanding of ordination.

### GENERAL INFORMATION:

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Home Address city state zip

\_\_\_\_\_  
Date of Birth Place of Birth

\_\_\_\_\_  
Present Address

\_\_\_\_\_  
city state zip Phone( )

### CHURCH MEMBERSHIP:

\_\_\_\_\_  
Current Location

\_\_\_\_\_  
Home Church Location

### FAMILY DATA:

\_\_\_\_\_  
Marital Status

### FORMAL APPLICATION:

I hereby apply to the Committee on the Ministry of the Christian Church In Kentucky for ordination.

Signed\_\_\_\_\_

\_\_\_\_\_  
Name of Petitioning Congregation

\_\_\_\_\_  
Address of Petitioning Congregation

\_\_\_\_\_  
City State Zip

**EDUCATION:**

Are you a student at the present time? \_\_\_\_\_

If so, expected date of graduation \_\_\_\_\_

Degree to be received \_\_\_\_\_. List the information called for in the following form relative to your academic and professional training.

College, University, or Seminary attended	Date attended From	To	Degree Received	Major
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List academic and scholastic honors, recognitions, and awards received \_\_\_\_\_

**SERVICE RECORD (If not under care of Kentucky):**

Candidacy: Date approved \_\_\_\_\_ By Whom \_\_\_\_\_

Licensed: Date \_\_\_\_\_ By Whom \_\_\_\_\_

Give the information called for in the following form relative to the churches, organizations, or institutions you have served during the course of your ministry.

Organization, Church, or Institution	Position Held	City & State	Began Month/Yr	Ended Month/Yr
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Name of religious body, if served, other than the Disciples of Christ and dates served \_\_\_\_\_

**ACTIVITIES:**

List other significant activities and organizations (community and church) in which you have participated in recent years.

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**REFERENCES:**

Your references should be a lay person/committee from your most recent field education site, a clergy mentor or field education supervisor, and a Seminary/Divinity School faculty member with whom you've studied.

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Candidate \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Candidate \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Candidate \_\_\_\_\_