

LOVING CHAPEL BAPTIST CHURCH

PASTOR APPLICATION FORM

PERSONAL INFORMATION

Date _____

Name _____
Last First Middle

Address _____
Street City State Zip code

Home Phone _____ Cell Phone _____

Email Address _____ Date of Birth _____ Age _____

Previous Address if less than 10 years: _____
Street City State Zip code

Marital Status: Married Separated Divorced Widowed Single

If Married, Name of Spouse _____ How many children do you have? _____

EDUCATIONAL BACKGROUND

School Type	Name of School	Address	Date Graduated	Major & Degree
College/ University				
Seminary				
Other				

MINISTRY EXPERIENCE

How long have you been in the ministry? _____ Have you ever taught Bible Study? Yes No

Have you ever pastored a church? Yes No

Please list the name, address and phone number of the current or most recent church you pastor/ed.

Name: _____ Phone Number: _____

Address: _____
Street City State Zip code

Reason for leaving: _____

May we contact this church? Yes No

Have you ever been an associate pastor of a church? Yes No

Please list the name, address and phone number of the current or most recent church you associate pastor/ed.

Church: _____ Phone Number: _____

Address: _____
Street City State Zip code

Reason for leaving: _____

May we contact this church? Yes No

Are you ordained? Yes No Date of Ordination: _____ Denomination: _____

Ordaining Pastor: _____ Phone Number: _____

Address: _____
Street City State Zip code

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you are self-employed, please list the company name. Attach additional sheets if necessary.

Company: _____ Phone Number: _____

Address: _____
Street City State Zip code

Dates of Employment From: _____ to _____ Job Title: _____

Reason for leaving: _____

Supervisor Name: _____ May we contact this employer? Yes No

Company: _____ Phone Number: _____

Address: _____
Street City State Zip code

Dates of Employment From: _____ to _____ Job Title: _____

Reason for leaving: _____

Supervisor Name: _____ May we contact this employer? Yes No

PERSONAL BACKGROUND

Are you a citizen of the United States? Yes No If not, are you authorized to work in the U.S.? Yes No

Have you ever been convicted of a felony? Yes No If so, please state the nature of the crime(s), when and where convicted and disposition of the case: _____

Are you willing to submit to background check and drug screening? Yes No

Are you related to any members of Loving Chapel? Yes No If so, please name: _____

ATTESTATION

I certify that all information in this application is accurate and complete to the best of my knowledge, and I have not knowingly withheld any information that might adversely affect my chances for employment. I understand that misleading or false statements will constitute cause for refusal of hire or termination of employment.

Signature of applicant: _____

Date: _____

APPLICATION SUBMISSION DETAILS

Please submit with this application the following additional materials:

- Resume and/or Ministry Vitae
- A cover letter
- Copy of Ministerial License and ordination certificates
- # Letters of Reference:

Application package should be emailed no later than DATE to the confidential submission address at:
lovingchapelsearchcommittee@gmail.com.

Although email submission is preferred, applications can be submitted via U.S. Mail, postmarked no later than DATE, as follows:

LOVING CHAPEL BAPTIST CHURCH
ATTN: LCBC PASTORAL SEARCH COMMITTEE (CONFIDENTIAL)
675 LOVING CHAPEL ROAD
FRANKLIN, KY 42134

NOTE: Missing Information may result in automatic disqualification. Final candidates will be notified and may be asked to provide additional information later in the selection process.

All Applicants must agree to a national background check, credit check and references.