

FORM 1

APPLICATION FOR CANDIDATES FOR THE GOSPEL MINISTRY PRESBYTERIAN CHURCH IN AMERICA

THE GULF COAST PRESBYTERY

<http://gulfcoastpres.org>

(Please print or type your answers)

I. PERSONAL HISTORY

Current E-mail _____

1. Name _____ Telephone _____

2. Present Address _____
(Street)

_____ (City) _____ (state) _____ (zip)

3. Birth date ____/____/____ Place _____ Age _____

4. Your baptism: infant? ____ Other? ____ by which church? _____

5. Where is your church membership? _____

6. Marital status _____ (Single, Married, Divorced, Remarried) If married, supply the following:

Date of marriage _____ Name of Spouse _____ Number of children _____

7. Your present occupation (if student, give institution and class) _____

8. Formal education record (list last three institutions you attended)

Institution	Dates	Major	Grade Avg.	Degree
1.	From ____/____ to ____/____			
2.	From ____/____ to ____/____			
3.	From ____/____ to ____/____			

9. Employment record (list last two employers)

Employer	Address	Dates employed
1.		From _____ to _____
2.		From _____ to _____

10. Name below five references who know you well, including your pastor, a person your own age, and one of your professors or employers:

Name	E-mail Address	Phone Number	City-State
1.			
2.			
3.			
4.			
5.			

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5. Describe your personal devotional life and other means by which you are seeking to grow as a Christian.

6. In what ways do you anticipate that our Presbytery may be helpful to you during your tenure as a candidate?

7. Have you ever applied to be received under care of any other presbytery or church body? If yes, give name of presbytery or church body and date of application.

Applicant's Signature _____

Date _____

To complete your application:

1. Have your doctor mail to the Chairman of Committee on Candidates (Current address available on the Presbytery website at gulfcoastpres.org) the Physical Qualifications Form (Form 4).
2. Have a transcript of all of your college (or high school) work sent to the Chairman of the Committee on Candidates (copies are acceptable)
3. Have your session complete the Sessional Certification Form (Form 3) and ask them to mail this form to the Chairman of Committee on Candidates (email is preferable).
4. Return this Form 1, with a recent photograph attached, to the Chairman of Committee on Candidates.

MAIL THIS FORM TO:

The GCP Chairman of the Ministers & Candidates Committee
(For current address see the website at <http://gulfcoastpres.org>)

Or contact the Clerk of Presbytery

TE Robert Hornick
124 Lovett Place, Pensacola, FL 32506
(850) 453-6658
email: gcpstatedclerk@gmail.com

ENDORSEMENT OF PRESBYTERY (to be completed by the Ministers & Candidates Committee)

This is to certify that _____ was received as a candidate

On _____, by the GULF COAST PRESBYTERY.

Chairman's signature _____

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4. Please comment on the applicant's emotional stability:

5. Please comment on the applicant's capacity to relate to people:

6. Please comment on the applicant's level of maturity:

7. Would you have any reservations in recommending to our committee that they accept this applicant as a candidate?

Signature of Reference _____

Date _____

Please return this form to this address:

The GCP Chairman of the Ministers & Candidates Committee
(For current address see the website at <http://gulfcoastpres.org>)

Or contact the Clerk of Presbytery

TE Robert Hornick
124 Lovett Place, Pensacola, FL 32506
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FORM 3

**SESSIONAL CERTIFICATION
OF AN APPLICANT FOR CANDIDACY
FOR THE GOSPEL MINISTRY**

THE GULF COAST PRESBYTERY

<http://gulfcoastpres.org>

The session should invite the applicant to meet with the session (or session's committee first, then with session).
IN NO CASE SHOULD THIS COMPLETED FORM BE SEEN BY THE APPLICANT.

1. How long has the candidate been a member of the church (see BCO 18-2)? _____

2. How does the session evaluate the applicant's Christian character?

Strengths:

Weaknesses:

Other comments:

2. Does the session recommend this applicant for candidacy? Would this recommendation be with any qualifications? If so, what?

STATEMENT OF CERTIFICATION: We, the session of _____
Presbyterian Church, certify that the above applicant has been a member of the church since
_____ and we commend this member to the Committee on Candidates as an applicant
for candidacy for the Gospel Ministry.

Signature of Moderator of the Session _____

Date _____

Please return this form to this address: The GCP Chairman of the Ministers & Candidates Committee--For current address see the website at <http://gulfcoastpres.org> or contact TE R. Hornick, the Clerk of Presbytery, at 850-453-6658 or gcpstatedclerk@gmail.com

**A REPORT ON THE PHYSICAL QUALIFICATIONS
OF AN APPLICANT FOR CANDIDACY
FOR THE GOSPEL MINISTRY**

THE GULF COAST PRESBYTERY

<http://gulfcoastpres.org>

_____ is applying to become a candidate. Please be frank in commenting on the applicant's physical qualifications for entering a calling, which is both physically, and emotionally demanding.

1. What, if any, chronic illnesses does the applicant have?

2. What, if any, physical defects does the applicant have?

3. In your professional opinion, would any of the above chronic illnesses or physical defects significantly hamper the work of the applicant as an ordained minister?

Signature _____

Date _____

Please mail the completed form to:

The GCP Chairman of the Ministers & Candidates Committee
(For current address see the website at <http://gulfcoastpres.org>)

Or contact the Clerk of Presbytery

TE Robert Hornick
124 Lovett Place, Pensacola, FL 32506
(850) 453-6658
email: gcpstatedclerk@gmail.com

(The applicant should supply the above name and address before sending this form to his doctor.)

FORM 5

DIARY OF A CANDIDATE
THE COMMITTEE ON MINISTERS & CANDIDATES
OF THE GULF COAST PRESBYTERY

<http://gulfcoastpres.org>

(The Chairman of the Ministers & Candidates Committee should keep this form on file)

NAME _____ Current E-MAIL: _____

HOME ADDRESS _____

SCHOOL ADDRESS _____

CHURCH HOME _____

INTERNSHIP:

Date Internship Initiated _____

Date Internship Approved _____

Internship Liaison: _____

Internship Mentor: _____

TRANSFERRED / ORDAINED _____

(Various contacts by the Committee should be noted.)

DateDiary	

REPORT FOR MINISTERIAL CANDIDATES

(To be filled out once a year by candidates)

Name _____ Age _____

Summer address _____

Permanent address _____

Has your marital status changed? _____

Spouse's Name: _____

Children's' Names and ages:

Degrees held / institutions granting _____

School attending _____ Class _____

Target Date for Graduation: _____

What is the grade scale for your school? _____ Where do you place? _____

Work, if not attending school _____

Do you plan to return to theological studies? _____ Where? _____

Have you definite plans for Christian work this summer? If so, what are those plans? _____

Are you receiving the minutes of Presbytery? _____

Have you been called to a church, or are you making plans for ordination at the end of the school year?

_____ Where, or for what reason? _____

Do you still feel that you are called to the Gospel Ministry? _____

Where do you attend public worship? _____ regularly? _____

Describe your pattern of private devotions _____

Do you have family devotions on a regular basis? _____

Could we on the committee be of particular help to you in your spiritual life, or in any other area that should normally concern us? (Please use the back to answer.)

M&C Committee members will provide reports to the chairman according to the following criteria:

- a. The Reports for Candidates should include the following items:**
 - Evidence of Personal/Verbal contact with candidates
 - Monthly email with the candidates (which can be forwarded to the home church)
 - An accounting of academic progress if enrolled in a school
 - A validation of academic status by a school official (BCO 18:6)
 - Contact with the session of the candidates home church to encourage their continued input in the candidates progress
 - Determining the candidates current church attendance and involvement
 - Present Ministry activities
 - Internship Status and Accomplishments (if applicable)

- b. The Reports for Licentiates should include:**
 - The Date when the license was granted and when it will expire
 - Some description of preaching activities in that year (Estimate the numbers and general locations of opportunities)
 - Provide the future intentions of this licentiate concerning preaching
 - Summarize the personal family status and over-all spirit of the Licentiate (including place of worship and how to contact his current pastor)
 - Determine availability to fill pulpits in GCP

- c. The Reports for Special TE's should include:**
 - A brief summary of the presbytery's actions regarding this pastor including the time the last action took place with a summary of that activity
 - An indication of current ministry activity so as to enable us to pray more specifically for these men.
 - If the pastor is w/o call, it is our desire to assist each one in his pursuit of finding a suitable call and reminding each person about the remaining time before the 3 year automatic demission (Report must include how long until the deadline)
 - Summarize the personal family status and over-all spirit of this TE (including place of worship and how to contact his current pastor)
 - Determine availability to fill pulpits in GCP