

Self-Inventory Ministry Skills and Preference

Tab from field to field to complete the inventory.

Name:

Date of Birth:

Home Address:

City:

State:

Zip Code:

Daytime Telephone:

Email Address:

Education

(Check all that apply)

- College Only
- College and Seminary
- Graduate School (Other than seminary)
- Certificate or Diploma
- Music Conservatory
- Business School
- Clinical Pastoral Education

Employed Church Experience

(Check all that apply)

- Current Seminary Student
- New Seminary Graduate
- One Full-time position
- More than one Full-time position

Ordained?

Yes

No

Available for: (check all that apply)

Full-Time

Bi-vocational

Part-Time

Interim

List the states/regions that you want your resume sent to:

Check positions for which you are available:

- | | | |
|--|--|---|
| <input type="checkbox"/> Pastor | <input type="checkbox"/> Christian Social Ministry | <input type="checkbox"/> Preschool/Children |
| <input type="checkbox"/> Associate Pastor | <input type="checkbox"/> Director of Missions | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Minister of Education | <input type="checkbox"/> Denominational | <input type="checkbox"/> Singles |
| <input type="checkbox"/> Minister of Music | <input type="checkbox"/> Pastoral Care/Family | <input type="checkbox"/> College Students |
| <input type="checkbox"/> Minister of Youth | <input type="checkbox"/> Church Planter | <input type="checkbox"/> Senior Adults |
| <input type="checkbox"/> Church Administrator | <input type="checkbox"/> Other (please specify) | |
| <input type="checkbox"/> Evangelism | | |

Describe the church or ministry setting where you feel you could be most effective:

Give a brief statement concerning the following:

Your conversion and call to the ministry:

Your family:

The Cooperative Program as a plan for mission support:

Your philosophy of ministry:

Your present ministry setting:

Do you want this inventory attached to your resume?

Yes

No

Name

Date