

PULPIT SUPPLY APPLICATION

(Please Type Or Print Neatly)

BIRTHDATE _____

NAME _____

HOME PHONE _____

ADDRESS _____

CELL PHONE _____

CITY/STATE/ZIP _____

E-MAIL _____

WORK PHONE _____

FAX _____

MARITAL STATUS: Married ___ (Wife's Name _____) Single ___ Divorced ___

CURRENT STUDENT STATUS: College ___ Seminary ___ CURRENT # OF YEARS - College ___ Seminary ___

FORMAL EDUCATION: (Colleges/Universities attended) DATES DEGREE(S)

1. _____

2. _____

3. _____

THROUGH THE CHURCH SERVICES OFFICE I WOULD LIKE TO BE CONTACTED FOR:

___ Various One Time Only Requests ___ Interim Pulpit Supply FROM PRESENT UNTIL: _____

DISTANCE WILLING TO TRAVEL / SPECIAL AREA(S) YOU WOULD LIKE TO GO TO: _____

I HAVE EXPERIENCE IN: (check which ministries & put how many yrs/mos FT or PT experience in blanks provided)

Preaching Ministry ___	Full-time ___	Part-time ___
Associate Ministry ___	Full-time ___	Part-time ___
Youth Ministry ___	Full-time ___	Part-time ___
Music Ministry ___	Full-time ___	Part-time ___
Dir. of Chr. Ed. ___	Full-time ___	Part-time ___

OTHER EXPERIENCE I HAVE: _____

HOBBIES OR SPECIAL INTERESTS: _____

REFERENCES MAY BE OBTAINED FROM: (Give Name/Address/Phone)

1. _____

2. _____

3. _____

APPLICANT SIGNATURE

DATE

OFFICE USE ONLY

The above individual has been approved for pulpit supply at LCU.

Director of Church Ministries

Date

Special Note(s):

