

THE UNITED METHODIST CHURCH BIOGRAPHICAL INFORMATION FORM

Name _____ Date _____

Address _____
Street City State Zip Code

Home Phone (_____) _____ School or Office Phone (_____) _____ Date of Birth _____

Sex: M _____ F _____ E-mail Address _____

Ethnic Origin: Asian _____ African American/Black _____ Hispanic _____ Other: _____
Native American _____ Pacific Islander _____ White _____

Local Church _____ City/State _____

Conference _____ District _____

Briefly describe your involvement in your local church, such as your leadership positions, groups you enjoy, church activities, etc.

Describe your church involvement in activities beyond your local church, such as district or annual conference work, church camps, workshops, outreach, etc.

<u>Your Educational Background</u>	<u>Dates Attended</u>	<u>Degree or Credit Hours</u>
High School _____	_____	_____
College _____	_____	_____
Graduate School _____	_____	_____
Theological Seminary _____	_____	_____
Course of Study for Ordained Ministry Yr. 1 _____ Yr. 2 _____	Yr. 3 _____ Yr. 4 _____ Yr. 5 _____	
Advanced Course of Study _____	Semester Hours Credit _____	

Marital Status Single, never married _____ Married, in first marriage _____ Married, in second or more _____
Widowed _____ Separated _____ Divorced _____

If Married, Spouse's Name _____ Date of Birth _____

Date of Marriage _____ Spouse's Occupation _____

Your Children, if any

Name of Child	Date of Birth	Sex	Education
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Dependants in addition to your spouse and children:

Name of Child	Date of Birth	Sex	Education
_____	_____	_____	_____
_____	_____	_____	_____

Describe your community involvement and volunteer work, such as participation in community organizations, social clubs, service agencies, and other non-church-related volunteer service:

Your childhood family and other significant relatives:

Name	Relation	Age	Sex	Education	Marital Status	Occupation
_____	Father	_____	_____	_____	_____	_____
_____	Mother	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Your work experience, such as current employment, previous employment, and military experience, if any:

Have you served as a local pastor, diaconal minister, deacon or elder in The United Methodist Church? Yes _____ No _____

If Yes, what Conference? _____

Conference Relationship

	<u>Indicate Date</u>		<u>Indicate Date</u>
Consecrated Diaconal Minister	_____	Probationary Member	_____
License as a Local Pastor	_____	Deacon in Full Connection	_____
Associate Member	_____	Elder in Full Connection	_____

Have you had a change in clergy relationship with a conference of The Methodist Church? Yes _____ No _____

If Yes, what Conference? _____

Change in Conference Relationship

	<u>Indicate Date</u>		<u>Indicate Date</u>
Discontinuance	_____	Location	_____
Leave of Absence	_____	Retirement	_____
Disability Leave	_____	Withdrawal	_____
Termination by action of the annual conference	_____		

*****Note***** If additional space is needed, please use a separate sheet of paper and attach to this form.

Form 102/2004