



# FAITHFUL CENTRAL BIBLE CHURCH MINISTERIAL PREPARATION APPLICATION

This application is to be completed to enter the Ministerial Preparation Leadership Program at Faithful Central Bible Church. Maximum 20 Applicants will be selected each semester. Completion of the application does not guarantee placement into the program.

August 1, 2010

Dear Applicant,

Attached is your application for the Ministerial Preparation Leadership Program. The submission deadline is **Friday, August 13, 2010**. Applications received beyond that date will be returned. **NO EXCEPTIONS.**

**Please make note of the following timeline that may apply to you:**

- |   |   |                             |
|---|---|-----------------------------|
| <b>Friday, August 13<sup>th</sup>, 5pm</b>          | - | <b>Application Deadline</b> |
| <b>Saturday, August 28<sup>th</sup>, 9am-Noon</b>   | - | <b>Interviews</b>           |
| <b>Sunday, September 19<sup>th</sup>, 1pm – 2pm</b> | - | <b>Orientation</b>          |

We look forward to serving you!

Pastor Monique Robinson



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Dear Applicant,

Thank you for your interest in our Ministerial Preparation Leadership Program (MPLP) at Faithful Central Bible Church (FCBC). Our desire is to serve you with excellence through this process—from submitting this application through the licensing/certification ceremony.

MPLP is a *minimum 2-year, maximum 5-year* program designed to equip you for internal and external ministry. The overall goal is to fulfill the mission of FCBC, Building Champions for Divine Deployment.

Two ministerial tracks are available, held during the Fall & Spring Semesters:

<b>Preaching Track (For Licensing)</b>	<b>Non-Preaching Track (For Certification)</b>
Hermeneutics	Hermeneutics
Ministerial Ethics	Ministerial Ethics
Ministry & Public Communications	Ministry & Public Communications
The Doctrine of Prayer	The Doctrine of Prayer
The Holy Spirit & Gifts	The Holy Spirit & Gifts
Old Testament Survey	Old Testament Survey
New Testament Survey	New Testament Survey
Greek in a Weekend	Greek in a Weekend
Homiletics	Field Work (2 <sup>nd</sup> Year)
The Preacher's Workshop	
Field Work (2 <sup>nd</sup> Year)	

A pre-licensing/pre-certification examination and interview will be required at the end of the program to ensure biblical competence, integrity, character, and commitment.

We pray this spiritual endeavor will be a meaningful, valuable, and life-changing experience.

For His Glory,

Monique Robinson, M.A.  
Pastor of Spiritual Formation



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## INSTRUCTIONS (PLEASE READ CAREFULLY!)

1. Please print in ink (use blue or black ink only).
2. Submit application with \$50 non-refundable administration fee.
3. **Prerequisites: a) A member of FCBC, b) Regularly give tithes & offering , and c) Ministry involvement**
4. Submit an essay on a separate piece of paper, approximately 1-2 pages (double spaced) which includes your personal and family, church background, your salvation experience and your personal growth in Christ, any significant events in your Christian life, and your current involvement at Faithful Central Bible Church (attendance, serving, outreaches, etc.).
5. Please submit a letter of recommendation from a pastor or ministry leader at Faithful Central Bible Church.

<b>HOW DID YOU HEAR ABOUT MINISTERIAL PREPARATION?</b> <small>Please check all that apply</small>	<input type="checkbox"/> Website <input type="checkbox"/> FCBCTV <input type="checkbox"/> Flyer <input type="checkbox"/> Facebook <input type="checkbox"/> Twitter	<input type="checkbox"/> Returning Student <input type="checkbox"/> FCBC Member, Name: <input type="checkbox"/> Licensed Minister, Name: <input type="checkbox"/> Friend, Name: <input type="checkbox"/> Other:	
<b>MINISTERIAL TRACK SELECTION</b>	<input type="checkbox"/> Preaching Track (Licensing) <input type="checkbox"/> Non-Preaching Track (Certification)		

## PERSONAL

<b>FULL LEGAL NAME</b>	Last	First	Middle	Nickname
<b>ADDRESS</b>	Street Address			Apt./Unit #
	City		State	Zip Code
<b>PHONE</b>	Home	Work	Cell	
	( ) - ( ) - ( ) -	( ) - ( ) - ( ) -	( ) - ( ) - ( ) -	
<b>EMAIL</b>				DATE OF BIRTH / /
<b>HIGHEST LEVEL OF EDUCATION</b>	<input type="checkbox"/> High School <input type="checkbox"/> Some College <input type="checkbox"/> BA/BS <input type="checkbox"/> Masters <input type="checkbox"/> Doctorate			College/University Attended
	<b>EMPLOYER</b>	<b>TYPE OF WORK?</b>		<b>HOURS YOU WORK PER WEEK?</b>

## MARITAL INFORMATION

<b>MARITAL STATUS</b> <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed				
<b>NAME OF SPOUSE OR FIANCE</b>		<b>DATE OF MARRIAGE (present or proposed)</b>	MONTH / YEAR	
<b>DOES YOUR SPOUSE OR FIANCE ATTEND FCBC?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Occasionally			
<b>SPOUSE/FIANCÉS EMPLOYER</b>	<b>TYPE OF WORK?</b>		<b>HOURS WORK ED PER WEEK?</b>	



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## MARITAL INFORMATION (CONT.)

- Yes    No   Is your spouse or fiancé a believer in Jesus Christ as Lord and Savior?
- Yes    No   Has your spouse or fiancé previously attended Ministerial Preparation? Year Licensed/Certified?
- Yes    No   Is your spouse or fiancé in agreement with your decision to attend Ministerial Preparation?
- Yes    No   Have you been previously married? How many times?      Date of most recent divorce?
- Yes    No   Do you have children? Number of children from previous marriage(s)?

### CONSENT OF SPOUSE/FIANCE

I, the undersigned, am in full agreement for my spouse/fiancé to attend the Ministerial Preparation Leadership Program at Faithful Central Bible Church and I agree to accompany him/her during the interview process.

Spouse/Fiancé's Signature \_\_\_\_\_ Date \_\_\_\_\_

## CHURCH AFFILIATION

<b>ARE YOU A MEMBER OF FCBC?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Membership Date</b>	MONTH / YEAR
<b>DO YOU BELIEVE IN JESUS CHRIST AS LORD AND SAVIOR?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Occasionally <input type="checkbox"/> Unsure		
<b>DO YOU REGULARLY ATTEND CHURCH SERVICES?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Occasionally		
<b>DO YOU GIVE TITHES &amp; OFFERING REGULARLY?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Occasionally		
<b>WHAT ARE YOUR SPIRITUAL GIFTS?</b> <small>Please check all that apply</small>	<input type="checkbox"/> Discernment <input type="checkbox"/> Evangelism <input type="checkbox"/> Exhortation <input type="checkbox"/> Faith <input type="checkbox"/> Giving <input type="checkbox"/> Healing <input type="checkbox"/> Helps <input type="checkbox"/> Hospitality <input type="checkbox"/> Knowledge <input type="checkbox"/> Leadership <input type="checkbox"/> Mercy <input type="checkbox"/> Miracles <input type="checkbox"/> Missionary <input type="checkbox"/> Pastor <input type="checkbox"/> Prophecy <input type="checkbox"/> Service <input type="checkbox"/> Teaching <input type="checkbox"/> Tongues <input type="checkbox"/> Interpretation of Tongues <input type="checkbox"/> Wisdom		

## MINISTRY

<b>HAVE YOU EARNED A SEMINARY DEGREE?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No Seminary: Degree Earned:	<b>HAVE YOU TAKEN ANY SEMINARY, THEOLOGY, OR BIBLE COURSES?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No Courses:
<b>ARE YOU A LICENSED MINISTER?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No Year Licensed: Licensing Body:	<b>ARE YOU ORDAINED?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No Year Ordained: Place of Ordination:
<b>LIST YOUR CURRENT MINISTRY INVOLVEMENT</b>			
<b>IN WHAT AREAS ARE YOU INTERESTED IN SERVING?</b> <small>Please check all that apply</small>	<input type="checkbox"/> C.I.T Classes <input type="checkbox"/> C.I.T Growth Groups <input type="checkbox"/> Children's Ministry <input type="checkbox"/> Counseling <input type="checkbox"/> Decision Counseling <input type="checkbox"/> Encouragers <input type="checkbox"/> Evangelism <input type="checkbox"/> Funerals <input type="checkbox"/> Healing & Deliverance <input type="checkbox"/> Intercessory Prayer <input type="checkbox"/> Community/Missions <input type="checkbox"/> Preaching <input type="checkbox"/> Prison Ministry <input type="checkbox"/> Union Rescue Mission <input type="checkbox"/> Visitation <input type="checkbox"/> Weddings		
<b>IDENTIFY THE AREA(S) OF MINISTRY TO WHICH YOU FEEL GOD HAS CALLED YOU?</b> <small>Please check all that apply</small>	<input type="checkbox"/> Prophetic <input type="checkbox"/> Teacher-Adults <input type="checkbox"/> Praise & Worship <input type="checkbox"/> Media-Sound <input type="checkbox"/> Not Sure <input type="checkbox"/> Evangelism <input type="checkbox"/> Teacher-Youth <input type="checkbox"/> Dance <input type="checkbox"/> Helps <input type="checkbox"/> Pastor <input type="checkbox"/> Teacher-Children <input type="checkbox"/> Drama <input type="checkbox"/> Administration <input type="checkbox"/> Missions-Short <input type="checkbox"/> Musician <input type="checkbox"/> Media-Production <input type="checkbox"/> Business <input type="checkbox"/> Missions-Long		



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## PERSONAL REFERENCES

Please list two people other than family members who have known you for a year or more. (We may contact them for additional information)

Name:                      Relationship:  
Address:                  Phone:                      Email:

Name:                      Relationship:  
Address:                  Phone:                      Email:

## CRIMINAL HISTORY

- Have you ever been convicted of a felony?  Yes  No  
 Have you ever been on or are you currently on probation?  Yes  No  
 Have you ever been accused, questioned, or investigated for child abuse, child neglect, or child molestation?  Yes  No  
 Have you ever been accused, questioned, or investigated for spousal abuse?  Yes  No

*If you have answered yes to any of these questions, please provide details on a separate sheet.*

## HEALTH

Please rate your general health:  Excellent  Good  Fair  Poor

- Are you currently being treated for a major illness?  Yes  No  
 Have you ever had a nervous breakdown?  Yes  No  Unsure  
 Have you ever been treated for an emotional disorder?  Yes  No  
 Do you have any disabilities that would require special accommodation?  Yes  No  
 Are you currently on any medication?  Yes  No

*If you have answered yes to any of these questions, please provide details on a separate sheet.*

## EMERGENCY CONTACT

Name:                      Relationship:  
Address:                  Home Phone:              Business Phone:              Cell Phone:  
Email:

## STATEMENT OF TRUTH

I hereby apply to Faithful Central Bible Church's Ministerial Preparation Leadership Program and certify that to the best of my knowledge the information given in this application is correct. If I am admitted I agree to abide by the regulations and standards of FCBC. I understand that all items submitted to FCBC as part of this application process become the permanent property of FCBC and will not be returned. If FCBC is notified that any of the information contained on this application is false, it will be grounds for immediate dismissal.

Full Name:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## PASTORAL/MINISTRY LEADER REFERENCE

Applicant's Name: \_\_\_\_\_

### TO THE PASTOR/MINISTRY LEADER:

*The above named applicant has applied for admission to the Ministerial Preparation Leadership Program at Faithful Central Bible Church and is asking you to furnish a reference. It is essential that you be frank and accurate in your remarks and estimations. Thank you for your help.*

How long have you known the applicant? In what capacity?

How well do you know the applicant?

Does the applicant's speech and conduct consistently exhibit his/her Christian beliefs?

How is the applicant regarded by his/her friends and community?

Has the applicant been a member in good standing and actively serving at Faithful Central Bible Church?

In what capacity?

What do you consider to be his/her strengths of personality and talents?

What do you consider to be his/her areas where personality development is needed?

What is the applicant's attitude toward authority and responsiveness toward instruction?

What degree of success do you predict for the applicant in the Ministerial Preparation Leadership Program?

Exceptional     High     Average     Mediocre

Do you believe the applicant is ready for Ministerial Preparation Leadership Program? If not, please explain.



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Pastor/Ministry Leader Reference, Page 2

**It will help us if you would further appraise the applicant. Please comment on the following items:**

*Please omit those about which you have insufficient knowledge to form an opinion.*

Christian Testimony: \_\_\_\_\_

Character: \_\_\_\_\_

Spiritual Growth: \_\_\_\_\_

Emotional make-up and behavior: \_\_\_\_\_

Leadership Ability: \_\_\_\_\_

Initiative: \_\_\_\_\_

Relationships: \_\_\_\_\_

Cooperation: \_\_\_\_\_

Common Sense: \_\_\_\_\_

Financial Habits: \_\_\_\_\_

Personal Appearance (Looks and dress): \_\_\_\_\_

Intelligence: \_\_\_\_\_

Other remarks: \_\_\_\_\_

I recommend     I do not recommend     I recommend with this reservation: \_\_\_\_\_

**Name** (please print): \_\_\_\_\_ **Position:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_