

APPLICATION FORM

EMPLOYMENT POSITION

Today's Date: / / /	
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PERSONAL DATA

Candidate Legal Name:	First	Last	Middl	е
Home Address:				
		Street Address		
City		State	Z	ip
Home Phone: () _		E-mail:		
	EMER	GENCY CONTACT		
Name:		Relationship:		
Address:Stre				
Stre Phone: ()		City	State	Zip
,				
	OTHER	FAMILY MEMBERS		
Spouse Name:		Relationship:		
Child Name:		Relationship:		
Child Name:		Relationship:		

For non-US citizens please include an official paper documenting your US residency privilege and limitations

EMPLOYMENT HISTORY

List all the present and past employment, beginning with the most recent. Name of Company Street Address City State Zip Length of employment Supervisor Duties you performed Name of Company Street Address City State Zip Supervisor Length of employment Duties you performed Reason for leaving: Name of Company City Zip Street Address State Supervisor Length of employment Duties you performed Reason for leaving: **EDUCATION AND INTERESTS** (Please write N/A where questions do not apply) Do you have your high school diploma? No Yes If you did not finish high school, did you receive your GED?

Yes No Did you attend college? Yes No Name? _____ 1. Give the total semester/quarter credit hours of Biblical and theological courses taken to date:

2. Please share ar	ny specialized training school, seminar, w	orkshops, etc. a	ttended:		
3. List any teache	r certifications or licenses you currently ho	old.			
4. List any honors	received and participation in extracurricu	lar activities whil	e a student?		
5. What are your f	avorite forms of recreation, hobbies, cultu	ıral interests or c	ther secular activ	/ities?	
6. What publicatio	ns/magazines do you usually read?				
List each school att	ended, course of study and degree receiv	red.			
Dates Attended	School Name/ City, State	Major/Minor	Diploma/Degree	Average G	rades
	CHRISTIAN EXPERIEN	CE AND SE	RVICE		
How long have you	been a Christian? (years)	Have you be	en baptized?	Yes	No
How long has your	spouse been a Christian? (yea	rs) Has s/he	been baptized?	Yes	No
Are you and your sp	pouse a member of a local church?	Yes No			
In how many church	nes have you (candidate) held membersh	ips?			
What is the name o	f the church which you are presently a me	ember of?			
Affiliation:					
How long have you	been a member there? (years)	Your spo	ouse? (years)	
Pastor:	Chui	rch Phone: ()		
Address:					

CHRISTIAN EXPERIENCE AND SERVICE

7.	What positions and ministry involvement have you had in churches where you have been a member's Example: elder, deacon, Sunday school teacher, children's ministry, pastor, nursing home, jail ministry etc.
8.	Please add some detail concerning your positions (i.e. length of time, how often etc.)
9.	What are your habits of devotional Bible study and prayer?
10.	Have you been instrumental in winning people to Christ?
11.	What do you consider your spiritual gifts? How have these been defined?
12.	Have you been ordained? Yes No When?//
	By what church?

13. Has your experience shown you to be able to submit cheerfully to the authority of leadership? Have you experienced mental conflict or discontent in this submission?

How would you rate the following ch	aracteristics in you Strong	r own life?	Average	Weak
characteristics in your own life?			, ,	
Dependable				
Reliable				
Honest				
Team Player Leadership Abilities				
Self-starter				
Commitment to Christ				
How much time do you spend on the How do you react in a crisis? What o		_	arch)?	
Have you had experience in carryin how did you respond to that situation				tirely agreed? If

				Yes	No					
Briefly relate how you ollowing questions as						ristian e	experier	nce at t	his time	e: Try to answer the
(1) How did you f				ile? ges have re					Christ a	as your Savior?
Candidate:										
Spouse:										
pouse.										
	n 1 – 1	10, how :	supportive	are you c	of the ca	andidate	e's desi	ire to w	ork am	ong the Amish an
Fo the spouse: Fror Plain people? Not supportive)				are you c		andidate 7	e's desi 8		ork am 10	ong the Amish and
Plain people? Not supportive)	1	2	3 4	5	6	7	8	9	10	
Plain people? Not supportive) To the spouse: From	1 1 – 10	2), how su	3 4	5 are you of p	6 artnerir	7 ng up w	8 ith the N	9 MAP Mi	10	(Very supportive
Plain people? Not supportive) Fo the spouse: From	1	2	3 4	5	6 artnerir	7 ng up w	8 ith the N	9	10	
Plain people? Not supportive) Fo the spouse: From (Not supportive)	1 1 – 10 1	2), how su 2	3 4 apportive a 3 4	5 are you of p 5	6 artnerir 6	7 ng up wi 7	8 ith the N 8	9 MAP Mi 9	10 nistry? 10	(Very supportive
Plain people? Not supportive)	1 1 – 10 1	2), how su 2	3 4 apportive a 3 4	5 are you of p 5	6 artnerir 6	7 ng up wi 7	8 ith the N 8	9 MAP Mi 9	10 nistry? 10	(Very supportive

Fill out this form on your computer, then save the completed document and either email or print/mail it to us. **Email:** Add as an attachment with the rest of your application materials and send to jkeim@mapministry.org. **Mail:** MAP Ministry, Attn: Joe Keim, 575 US-250, Greenwich, OH 44837 Office: (419) 962-1515