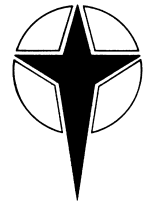


American Baptist Churches of Connecticut

**“IN CARE PROGRAM” APPLICATION**



Please file this form with: The Commission on the Ministry  
American Baptist Churches of Connecticut  
90A North Main Street  
West Hartford, CT 06107

**Name:** \_\_\_\_\_  
Last First Middle

**Home Address:** \_\_\_\_\_  
Street City State Zip Code

**School Address:** \_\_\_\_\_  
Name of School

\_\_\_\_\_ Street City State Zip Code

**Telephones: Home:** \_\_\_\_\_ **School:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_ **Birthdate:** (m/d/y) \_\_\_\_\_

**Church Membership:** \_\_\_\_\_  
Name of Church City/State

**Please describe your vocational aims:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Academic degree(s) presently held:**

\_\_\_\_\_ Degree Date Institution

\_\_\_\_\_ Degree Date Institution

**Are you presently working toward a college or seminary degree?** \_\_\_\_ Yes \_\_\_\_ No

If your answer was yes, where are you doing your work?

\_\_\_\_\_ Institution

\_\_\_\_\_ Address (street/city/state/zip)

When will you complete this work? \_\_\_\_\_

(over)

**Do you plan further education beyond the program in which you are now engaged?**

\_\_\_\_\_Yes \_\_\_\_\_No

If yes, describe this work: \_\_\_\_\_

**Have you been licensed?** \_\_\_\_\_No \_\_\_\_\_Yes When? \_\_\_\_\_

By whom? \_\_\_\_\_

Church

City/State

If your answer was no, do you plan to be licensed? \_\_\_\_\_Yes; \_\_\_\_\_No

**Have you been ordained?** \_\_\_\_\_No \_\_\_\_\_Yes When? \_\_\_\_\_

By whom? \_\_\_\_\_

Church

City/State

If your answer was no, do you plan to be ordained? \_\_\_\_\_Yes \_\_\_\_\_No

Please have three references, including the minister of the church where you hold your membership, sent to:

Commission on the Ministry  
American Baptist Churches of Connecticut  
90A North Main Street  
West Hartford, CT 06107

In addition, in the final stage of the ordination process, you will be asked to submit two seminary/theological school/academic references.

Comments:

**Date of Application:** \_\_\_\_\_ **Signature:** \_\_\_\_\_