## APPLICATION FOR MEMBERSHIP IN THE PRESBYTERY OF DENVER

## As a Minister-At-Large or Minister in Service Beyond the Jurisdiction of the Church

Name_	Phones (W)(H)
Home	Address
Work	Address
Email	Address Preferred Mailing Address: Home Work
I. A.	YOUR WORK On an attached page:  1) Please describe your present work in sufficient detail that we can understand the nature of your service and what it entails.  Or 2) If you are unemployed or engaged in work which you believe does not meet the criteria for validated ministry, please share the current circumstances surrounding your situation.
В.	Are you self-employed? Yes No  If no: Employer  To whom are you immediately responsible and/or accountable for your work? (ie. board or directors, dean, departmental supervisor, director, etc.?
	What is your position?  Your work is full time part-time paid volunteer
C.	If you are engaged in counseling or therapeutic relationships with clients, please find enclosed a copy of the policy adopted by The Presbytery of Denver.  For Policy Item #1, please send a copy of your current license or registration.  For Policy Item #4, please send a Certificate of Insurance from your insurance company.

<b>II.</b> A.	YOUR PARTICIPATION IN THE LIFE OF THE CHURCH  It is expected that all minister members of Presbytery will maintain a relationship with a particular church. If you are new to Denver, we will be happy to help you find a church.  If you are not new to Denver, where do you regularly worship?  Would you be interested in pursuing a parish associate relationship? YesNo			
	In what ways do you or wou	ld like to contribute to the life of	that congregation?	
В.	Responsible participation in the deliberations and work of the Presbytery is expected of all active members/members at large. Please describe below your previous and/or present activity within your current presbytery of membership.			
<b>C</b> .	Please attach a brief, one-pag	ge, statement of faith.		
Socia	al Security Number:	Birthdate	Gender:	
Semi	nary/School of Theology:	and the state of t		
Earn	ed Doctorate Degree:	School	Date	
Nam	e of Spouse, if married			
Next	of kin, or Who to notify in case Name and address	e of emergency	Phone	
Date	of Ordination	Ordaining Presbytery		
Curr	ent Presbytery of Membership			
Prev				
Retin	rement Information	Date of Church or Position No		