

The Following Must Be Included in Each Candidate File. Check when item completed
 Items in **BOLD** ARE REQUIRED FOR ORDINATION

Ordination: Call to Ministry (Notice of Call to Ministry from Local Church) – Date: ___/___/___

Ordination: Examination For Licensure or Renewal (Local Church) –Date: ___/___/___

- First Renewal Date: ___/___/___
- Second Renewal Date: ___/___/___
- Third Renewal Date: ___/___/___
- Fourth Renewal Date: ___/___/___

Ordination: Authorization for Licensure or Renewal (by Regional Team) Date : ___/___/___

- First Renewal Date: ___/___/___
- Second Renewal Date: ___/___/___
- Third Renewal Date: ___/___/___
- Fourth Renewal Date: ___/___/___

Ordination: Examination for Ordination (Local Church) *Must be licensed for at least one year*
Date Received: ___/___/___

Ordination: National Ordination Council Examination (by Regional Team) – Date : ___/___/___
Sent by Region after Licensure of at Least One Year, One Year in Active Ministry, and Completion of Entire Written and Oral Exam and All Required Classes and Readings

Ordination: Confidential Reference Form, 3 references. Sent to Reference, who returns these directly to the Regional Team - Date: ___/___/___

- Reference #1 Date: ___/___/___
- Reference #2 Date: ___/___/___
- Reference #3 Date: ___/___/___

DISC and Myers Briggs Personality Inventory – Date : ___/___/___

Criminal Background Check – Date : ___/___/___

Ordination: Resume’ and Pastoral Profile –

- | <i>Section</i> | <i>Date</i> | <i>Section</i> | <i>Date</i> |
|---|-------------|---|-------------|
| <input type="checkbox"/> Personal info | ___/___/___ | <input type="checkbox"/> Role of Elder | ___/___/___ |
| <input type="checkbox"/> Pastoral Ministry | ___/___/___ | <input type="checkbox"/> Pastoral Finances | ___/___/___ |
| <input type="checkbox"/> Christian Experience | ___/___/___ | <input type="checkbox"/> Pastoral Statements | ___/___/___ |
| <input type="checkbox"/> Doctrine | ___/___/___ | <input type="checkbox"/> Pastoral Ethics | ___/___/___ |
| <input type="checkbox"/> Vision | ___/___/___ | <input type="checkbox"/> Spiritual Gifts | ___/___/___ |
| <input type="checkbox"/> Core Values | ___/___/___ | <input type="checkbox"/> Style of Leadership | ___/___/___ |
| | | <input type="checkbox"/> Philosophy of Ministry | ___/___/___ |

Professional Resume’ WITH CURRENT PICTURE – Date Received: ___/___/___

~CONTINUED on NEXT PAGE~

- Two (2) Sermons, either audio or video (CD, DVD, or approved formats)
- Ordination: Philosophy of Ministry
- Ordination: Written Examination
 - A. Ordination: Social and Self Care Issues ___/___/_____
 - B. Cross Cultural Exp. ___/___/_____
 - C. Reading/Coursework ___/___/_____

REGIONAL ACTION TAKEN			
Date	Action	Forms Received	Forms Sent
Actions Leading to Licensure and/or Ordination			
	Initial Meeting		
	License Granted		
	MMPI Taken & Results Received		
	License Renewal		
	License Renewal		
	License Renewal		
	License Renewal		
	NOC Exam for Ordination Requested		
Actions Leading to Recognition of Ordination from Other Denomination or Reactivation of Ordination			
	Initial Meeting		
	License Granted		
	MMPI Taken & Results Received		
	License Renewal (if needed)		
	NOC Exam for Ordination Requested		
Actions Leading to Commissioning for Special Ministry			
	Initial Meeting		
	Commission Granted		
Other Actions			
	Licensure Suspended		
	Licensure Terminated		