

**Presbytery of Arkansas**  
Minister of the Word and Sacrament Information Form

Date form filled out:

**Contact Information**

Name:

Home Address:

Church/Employment Address:

Phone Number(s):

Email address:

**Personal Information**

Birthdate:

Place of Birth:

Marital Status:

*(answer next few family-related questions only if relevant)*

Name of Spouse:

Date of Marriage:

Date Widowed:

Date Divorced:

Children of Current Marriage with Name, Birthdate, and Gender:

Children of Previous Marriage(s) with Name, Birthdate, and Gender:

**Educational Information**

Colleges Attended with Graduation Date(s) and Degree(s) – include post-graduate degrees:

Seminaries Attended with Graduation Date(s) and Degree(s) – include post-graduate degrees:

**Ecclesiastical Status**

Date and Place of Ordination:

Ordained by which Presbytery:

Received by the Presbytery of Arkansas on (date), and from (which Presbytery):

If honorably retired, date of retirement:

**Employment History**

Secular Employment – list beginning and ending dates, position, employer, and city/state:

Ecclesiastical Employment – list beginning and ending dates, position, employer, and city/state:

**Ecclesiastical Service**

Presbytery Committee Service – include date(s), committee, and presbytery:

Synod or General Assembly Service – include date(s), committee, and which presbytery you were a member of during your service to a synod or the General Assembly (if you have been a commissioner to the General Assembly please give what year):

**Please list any other relevant information below.**