

METROPOLITAN CHICAGO SYNOD, ELCA
1420 W. Dickens Avenue
Chicago, IL 60614-3004

Application for Calls and Appointments to Ministries in Specialized Settings

p
p

Date submitted:

Name:

Address:

Date of ordination/certification:

Word and Sacrament
 Word and Service

Male
 Female

Office phone:

Home phone:

E-mail:

Synod affiliation:

Congregation membership:

Address:

Roster status:

- Active On Leave From Call/Appt. Retired

Position applying for:

Institution/agency:

Address:

Full-Time

Starting date:

Shared-Time

Affiliation (check all that apply):

Church-Related: ELCA Pan-Lutheran Other

Government: Federal State County City

Private: For-Profit Nonprofit

Name:

**Application for
Calls and Appointments to Ministries in Specialized Settings**

Other significant training for specialized ministry:

Training center/location	Position	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>

Congregation experience:

Congregation /location	Position	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>

Previous professional experience in specialized settings:

Institution/Agency	Location	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> to <input type="text"/>

Professional certifications/memberships:

Name of professional organization	Status (certified, member, etc.)	Year certified
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>