Pulpit Supply Application Form

The Presbytery of Northumberland Synod of the Trinity Presbyterian Church (U.S.A)

Name of Applicant					
Work Address					
	Work Phone				
Home Address					
		Home Phone			
In the publicized Pulpit Supply List, please use my:					
□ work phone num □ home phone num □ both phone num □ Email: □ I have been refer □ I am making a sel Ecclesiastical Status: Denomination Judicatory Membersh	nber pers 	on Ministry by:			
<u>Date of Ordination</u> <u>Classification</u>					
Work Experience					
Place of Work	Address	Duties	Dates		

denomination wh	o can attest to your me	embership and standing:	
Name of Referen	ce Address	Phone	
1			
3			
•	•	member congregation of the Presbyte	ry of
Northumberland?	' If so, which one? wha	at is the nature of the relationship?	
		g to be enrolled on the Presbytery of N	Iorthumberland's
approved Pulpit S	upply List:		
Signature			
	#1 a		
Date of Applica	tion		
Please return this	application, with the fo	ollowing items:	
	a copy of your resume.	_	d the many
	written statement describi	ing your views in theology, the Sacraments, an	a the government

References: Please supply the names of three references, including an official from your

to: The Commission on Ministry The Presbytery of Northumberland P. O. Box 334 Montoursville, Pennsylvania 17754

For Commission on Ministry Use Only:
Date Application Received Date Considered
Eligibility Grid Status:
 □ Ordained Presbyterian Clergy □ Ordained Clergy from a denomination in which we are in correspondence □ Ordained Clergy from a denomination in which we are not in correspondence □ Commissioned Ruling Elder or Lay Preacher □ Qualified Lay person
Steps Completed (according to Eligibility Grid):
☐ Inquiry initiated by:, date of initial inquiry:
 □ Invitation extended by COM to submit application [date:] □ Satisfactory Credentials □ Written Statement of Faith □ References checked by Presbytery Executive and COM Chair.
Comments: ☐ Examination by Commission on Ministry [Date:] Comments:
☐ Examination by Presbytery [Date:]
☐ Training [Date:]
☐ Commissioning by Presbytery [Date:]
Presbytery Action taken:
For Commission on Ministry Use Only: Date Received: Date Approved: Date received authorization letter from other governing body (if applies): Comments: