



New Mercies Christian Church

Elder Ordination Application for Ministers

Name: _____

Date of Birth: _____

Address: _____

Home Phone: _____

Work Phone: _____

Place of Employment: _____

Cell Phone: _____

E-Mail: _____

Marital Status: *(please circle)* Single/Married/Divorced/Widowed

Spouse's Name: _____ Anniversary Date: _____

Emergency Contact Person: _____

Emergency Phone: _____

Are you a consistent tither to New Mercies Christian Church? *(please circle)* **Yes** **No**

If no, please explain below

What ministries are you involved in at New Mercies?

1. Ministry: _____ Role: _____

2. Ministry: _____ Role: _____

3. Ministry: _____ Role: _____

4. Ministry: _____ Role: _____

What ministries or organizations are you involved in outside of New Mercies? *(Be specific as to the name and your role within the ministry).*

1. Ministry: _____ Role: _____
2. Ministry: _____ Role: _____
3. Ministry: _____ Role: _____
4. Ministry: _____ Role: _____

In your own words, define Pastoral Ministry/Eldership.

What scripture best supports/illustrates your definition of Pastoral Ministry/Eldership? Please elaborate.

How do you envision yourself functioning in Pastoral Ministry/Eldership at New Mercies Christian Church?

Please specify how you are presently or have previously operated in Pastoral Ministry/Eldership.