

402 Blair St.  
Keystone, SD 57751  
(605) 666-4627  
www.keystone-church.com  
Facebook.com/Keystone-Church.SD

FIRST CONGREGATIONAL CHURCH OF KEYSTONE

Date: \_\_\_\_\_

**PASTOR INFORMATION FORM**

*GENERAL INFORMATION:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cellular Phone:(\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Marital Status:      Single      Married

Spouse's Name: \_\_\_\_\_

Spouse's specialized training \_\_\_\_\_

Does your Spouse assist/participate in your ministry? \_\_\_\_\_

Describe your Family:

---

---

---

---

---

---

---

---

**EDUCATION:**

College: \_\_\_\_\_

Degree: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Seminary: \_\_\_\_\_

Degree: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Other Graduate studies: \_\_\_\_\_

Continuing education: (*workshops, seminars, etc.*) \_\_\_\_\_

\_\_\_\_\_

Specialized training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL INFORMATION:**

Present position: (*check all applicable*)

Senior Pastor       Associate Pastor       Assistant Pastor

Youth Pastor       Director of Christian education       Pulpit supply

Other (*please specify*) \_\_\_\_\_

Church or institution of present position:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ website: \_\_\_\_\_

E-mail: \_\_\_\_\_

Of what Church(es) are you a member: \_\_\_\_\_

Date of Ordination: \_\_\_\_\_ Denomination ordained by: \_\_\_\_\_

Date of License (*if not ordained*): \_\_\_\_\_ Denomination licensed by: \_\_\_\_\_

\_\_\_\_\_

**MINISTRY EXPERIENCE:** *(list the last four positions only)*

**Please include:** Position/title and duties, Church name, address, phone, Church size, dates of tenure, full/part time, and reason for leaving.

- 1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other information you believe pertinent to your past Ministerial positions:

---

---

---

**TOTAL YEARS OF PASTORAL MINISTRY:** *(Enter number of years)*

\_\_\_ Senior pastor                      \_\_\_ Minister of Visitation                      \_\_\_ Minister of Counseling

\_\_\_ Solo Pastor                      \_\_\_ Youth Minister                      \_\_\_ Assistant Pastor

\_\_\_ Minister of Music                      \_\_\_ Minister of Christian Ed.                      \_\_\_ Minister of Missions

Other *(please specify)* \_\_\_\_\_

Other work experience contributing to effective ministry:

What activities are you involved in beyond the Church?

**THEOLOGICAL INFORMATION:**

Check each of the following evangelical groupings that would pertain or apply to your theological approach to Pastoring a Church.

- Fundamentalist                       Dispensational                       Conservative Evangelical
- Reformed                                       Wesleyan                                       Progressive Evangelical
- Charismatic                                       Pentecostal                                       Main-line Evangelical
- Other (explain): \_\_\_\_\_  
\_\_\_\_\_

Check your Baptismal Approach:(check all that apply)

- Believer’s baptism                       Immersion                       Infant baptism                       Sprinkle/pour

Which word(s) best describe your style of Worship:

- traditional                                       Contemporary                                       Blended
- Other: (explain) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which translation of the Bible do you use most often:

\_\_\_\_\_

**REFERENCES:**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_

**Note: Please treat this information in a confidential manner. First Congregational Church of Keystone expects all recipients of this application to preserve its contents with the strictest of confidentiality.**

ADDITIONAL INFORMATION AS APPLICANT DEEMS PERTINANT: