

SIZE OF PARISH: (Check all that apply)

- 1. 1-75 Baptized
- 2. 76-200
- 3. 201-500
- 4. 501-800
- 5. 801+

MINISTRY SETTING: (Check all that apply)

- 1. Rural
- 2. Town (2,500-5,000)
- 3. City (5,000-10,000)
- 4. City (10,000-25,000)
- 5. City (25,000-50,000)
- 6. City (50,000-100,000)
- 7. City (100,000-200,000)
- 8. Large City (200,000+)
- 9. Open to Serving Outside Continental U.S.

TYPE OF PARISH/MINISTRY: (Check all that apply)

- 1. Single Parish
- 2. Multiple Parish
- 3. Sole Pastorate (Not part of a team)
- 4. Team (Senior)
- 5. Team (Assistant/Associate)
- 6. Native American Ministry
- 7. Black Ministry
- 8. Hispanic Ministry
- 9. Asian Ministry
- 10. Deaf Ministry
- 11. Campus Ministry
- 12. Institutional Ministry
- 13. Work with School
- 14. New Work/Church Planter
- 15. Urban
- 16. Inner City
- 17. Suburban
- 18. Bivocational

Name _____

SPECIAL CONCERNS

- Yes No
- Restricted Status Suspended Status

Phone No. _____

LITURGICAL ATTITUDES (Check all that apply):

- | | | | |
|-----------------|-----------------------------|--|-----------------------------|
| | Rigid | | Flexible |
| Traditional | 1. <input type="checkbox"/> | | 4. <input type="checkbox"/> |
| High Liturgical | 2. <input type="checkbox"/> | | 5. <input type="checkbox"/> |
| Contemporary | 3. <input type="checkbox"/> | | 6. <input type="checkbox"/> |

THEOLOGICAL POSITION (Check one)



Evangelical
Comment Below, If Necessary

ANY REASON OR DESIRE TO MOVE: Yes No

Comment _____

PASTOR'S MARITAL STATUS:

No. of times married _____ No. of times divorced _____

Comments _____

ADDITIONAL INFORMATION ON WIFE

Ethnic Background _____

No. of times married _____ No. of times divorced _____

Attitude Toward the Ministry _____

Interests/desires concerning employment _____

AdditionalComments _____

CURRENT SALARY AND BENEFITS INFORMATION:

The total cash salary for 12 months of service excluding any housing allowance is: _____

Housing Provided? Yes No Housing Allowance? Yes No If so Amount _____

Housing equity? Yes No If so Amount _____ Utilities? Yes No If so, Amount? _____

Participates in Social Security? Yes No Continuing Education Allowance _____

Is Car Provided? Yes No Annual Car Allowance/Mileage Reimbursement _____ Car Replacement _____

Concordia Health Plan? Yes No Explain: Worker Only Worker and Spouse Worker, Spouse and Children

Concordia Retirement, Disability and Survivor Plan? Yes No

Other Reimbursements? _____

Name _____