

# The United Methodist Church Biographical Information Form

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

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

Home Phone: \_\_\_\_\_ School or Office Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Sex:  Male  Female

Ethnic Origin:  Asian  African/Black American  Hispanic  
 Native American  Pacific Islander  White

Local Church: \_\_\_\_\_ City: \_\_\_\_\_

Conference: \_\_\_\_\_ District: \_\_\_\_\_

Briefly describe your involvement in your local church, such as your leadership positions, groups you enjoy, church activities, etc.

Describe your church involvement in activities beyond your local church, such as district or annual conference work, church camps, workshops, outreach, etc.

Educational Background:	Dates Attended	Degree or Credit Hrs.
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High school: \_\_\_\_\_

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

Graduate School: \_\_\_\_\_

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

Course of Study for Ordained Ministry: Yr. 1  Yr.2  Yr.3  Yr.4  Yr.5

Advanced Course of Study: Semester Hours Credit: \_\_\_\_\_

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Marital Status:     Single, never married                       Married, in first marriage  
                          Married, in second or more             Widowed             Separated                       Divorced

If married, spouse's name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Spouse's occupation: \_\_\_\_\_

Your children, if any:

Name of child	Date of Birth	Sex	Education
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Dependents in addition to your spouse and children:

Name	Date of Birth	Sex	Education
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe your community involvement and volunteer work, such as participation in community organizations, social clubs, service agencies, and other non-church related volunteer service:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your childhood family and other significant relatives:

Relation	Age	Sex	Education	Marital Status	Occupation
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Your work experience, such as current employment, previous employment, and military experience, if any:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Have you served as a local pastor, diaconal minister, deacon or elder in the United Methodist Church?

Conference? \_\_\_\_\_

## Conference Relationship (Indicate Date)

Consecrated Diaconal Minister \_\_\_\_\_

License as a Local Pastor \_\_\_\_\_

Associate Member \_\_\_\_\_

Probationary Member \_\_\_\_\_

Deacon in Full Connection \_\_\_\_\_

Elder in Full Connection \_\_\_\_\_

Have you had a change in clergy relationship with a conference of the United Methodist Church? \_\_\_\_\_

Conference? \_\_\_\_\_

## Change in Conference Relationship (Indicate Date)

Discontinuance \_\_\_\_\_

Leave of Absence \_\_\_\_\_

Disability Leave \_\_\_\_\_

Location \_\_\_\_\_

Retirement \_\_\_\_\_

Withdrawal \_\_\_\_\_

Termination by action of the annual conference \_\_\_\_\_