

# The Church of the Incarnation Pastoral Residency Application

This application may be printed, completed, and emailed. A separate file corresponding to this application will also be accepted.

## I. CONTACT INFORMATION

\_\_\_\_\_

TITLE (MR. / MRS. / REV. / DR.)

\_\_\_\_\_

FIRST NAME(S)

\_\_\_\_\_

LAST NAME

- MALE
- FEMALE

NAMES OF FAMILY MEMBERS (IF APPLICABLE):

ADDRESS:

EMAIL:

PHONE:

HOW DID YOU HEAR ABOUT THE PASTORAL RESIDENCY?

## II. EDUCATION AND EMPLOYMENT

Please list your educational courses in reverse chronological order (most recent first.) Please note any awards you received in connection with your education.

What is your area of focus or interest in your academic studies?

Please list previous jobs (most recent first), including the employer, the nature of the work, and the level of responsibility.

## III. TESTIMONY AND CALLING

How did you become a Christian?

What forms of Christian service have you undertaken in the past? Which of these involve teaching the Bible to others?

What forms of Christian service are you currently engaged in? Which of these involve teaching the Bible to others?

What do you consider to be your main strengths in Christian character and service?

What forms of Christian service are you currently engaged in? Which of these involve teaching the Bible to others?

What do you consider to be your main weaknesses in Christian character and service?

What figures or books have been most influential in your Christian character and service thus far?

How would you describe your theological convictions/position?

Why are you interested in our pastoral residency?

If you were appointed as our next pastoral resident, what would you hope to do afterwards?

Given complete freedom of choice, what would you most like to achieve in your lifetime?

#### **IV. TESTIMONY AND CALLING REFERENCES**

Of your references, please include one seminary professor and two ministry supervisors, one of whom should be your current senior pastor or an appropriate member of the senior pastoral staff.

_____ NAME OF FIRST REFERENCE	_____ RELATIONSHIP
_____ EMAIL ADDRESS	_____ PHONE
_____ NAME OF SECOND REFERENCE	_____ RELATIONSHIP
_____ EMAIL ADDRESS	_____ PHONE
_____ NAME OF THIRD REFERENCE	_____ RELATIONSHIP
_____ EMAIL ADDRESS	_____ PHONE

Note: References may be contacted immediately upon receipt of your application. Please let us know when submitting your application if for any reason you would not like us to do this. (Use the "additional information" section below.)

#### **ADDITIONAL MATERIALS: RESUME AND BIBLE TEACHING**

When you submit your application, please include an up-to-date resume and a link or downloadable file to a recent sermon (or an equivalent Bible teaching in the relevant format).

#### **ADDITIONAL INFORMATION**

If there is anything we need to know in order to handle your application properly, please use this section to let us know.

THE CHURCH OF THE INCARNATION

PHONE: 540-432-5533

75 North Mason St. Harrisonburg VA 22802

Email your finished application to [Keith@theincarnation.org](mailto:Keith@theincarnation.org)

Find our website at <https://theincarnation.org/>