

Application for Synod Authorized Minister

Date

Personal Information			
lame:			
Last	First	Middle	(Maiden)
Birthdate:		_	
Month/Day/Ye	ar		
		Citizenship:	
C	ity/State		
Baptism:			
Place/Cit	y/State		Date
			aucasian Arab & Middle EasternOther (specify)
Native Language:		Fluent in Languages(s):	
Marital Status: Single	e Married	Widowed Divorce	ed
Address			
Street		PC	D Box Address
City		State	ZIP

Congregational Membe					
	Cor	ngregation Name		Member Since	e (date)
City		State		ZIP	
Pastoral Reference	(ELCA Pastor)				
Family (if applicable)	1				
Spouse's Full Name:					
	Last		First	Middle	
Profession:	Educat	ion:	Religious Aff	iliation:	
Employment Status:	Full-time ——	Part-time	Not Employed		
Spouse's Date of Birth:			Date of Marriage:		
	Month/Day			Month/Day/Year	
Children living with you	and their date of b	irth:			
Child's name:		Date of Birth:	Child's name:		Date of Birth:
		_			
Education History					
ı	Name of School and	d City/State		Year of Grad.	Type of Degree
High School					
College					
Graduate School					

ucation		
which you have complete	ed coursework (indicate bachelor or graduate	e level):
listory: Please list your m	ost recent position first, including any militar	ry service
<u>listory:</u> Please list your m Position	ost recent position first, including any militar Employe r	ry service Dates

Synod Authorized Minister Questions and Essay

Northwestern Minnesota Synod, ELCA

YES	NO	1. Do you intend to live in accord with the standards of conduct of a ministry leader as described in
		the document Definitions and Guidelines for Discipline?
		2. Do you belong to any organization or lodge like the Free Masons or Eastern Stars which claims to possess in its teachings and ceremonies that which the Lord has given solely to the Church?
		3. Do you have or have had any health conditions (physical or psychological that might interfere with your ability to serve as a ministry leader in the ELCA?
		4. Are there issues in your family situation or personal life that could adversely affect your ability to serve as an effective leader in the ELCA?
		5. Do you now engage, or have you ever engaged in any addictive behavior, including drug or alcohol abuse or sexual or pornographic addictions?
		6. Have you ever been terminated or resigned from any employment or volunteer activities due to accusations of misconduct, whether financial, sexual, ethical, or other improper behavior?
		7. Have you ever engaged in, been accused of, charged with, or convicted or a crime or illegal conduct, including conduct resulting in suspension or revocation or your driver's license?
		8. Have you ever been engaged in, accused of, sued, or charged with sexual molestation, sexual harassment, child neglect or abuse, spousal neglect or abuse, or financial improprieties?
		9. Do you have any sexual attraction toward children or minors or any history of sexually deviant behavior, including behavior with children or minors?
		10. Have you engaged in any behavior or been involved in any situations that, if they became known by the church, might seriously damage your ability to continue in synod authorized ministry?
		11. Is there additional information that would assist the Bishop or the Synod SAM Committee in considering your application or that you believe the Bishop or the committee should know?

SAM APPLICATION ESSAY

The SAM application essay is an autobiographical reflection which should contain insights and understandings gained during the period of discernment leading to your decision to apply to be a Synod Authorized Minister in the Northwestern Minnesota Synod. It is not expected that your process of discernment is completed. You are asked only to provide an honest assessment of your current self-understanding of your journey thus far and your hope for the future. It will provide the committee with the background that will help guide your interview.

Please submit this application to Bp. Bill Tesch, btesch@cord.edu and Kip Fontaine, SAM Coordinator, kipfontaine@cord.edu. Please save a copy of the application for yourself and retain it for your SAM interview.

• Provide a brief autobiography that includes your early years, faith formation, and current life situation.

Describe your journey of discernment. How did you first experience your call to lay ministry? Wha you done to deepen this understanding? Who have you discussed this with? Through this intention time of discernment, what have you learned about yourself, the church and the world?	

Describe your relationship with Jesus Christ.		
 What plans do you have to either complete your education or formation to work as a SA 	M, or to	
continue in your formation as a professional leader in the church?		
Please indicate possible mentor (ELCA ordained pastor): Name and congregation if applicable		
Often, Synod Authorized Ministers are encouraged to explore rostered ministry in the ELCA. Is there a possibility that your service as a SAM might lead to rostered service?	Yes	No

Candidate Name:_			
	Date:		

Specific Training to Serve as a Synod Authorized Minister

In the ELCA, Synod Authorized Ministers must have training in each of the 6 areas listed below. The SAM Committee of the NWMN Synod strongly recommends the program "LED by Faith--An Academy for Lay Ministry, Enrichment and Discernment" offered in partnership with other synods in Region 3 and currently being held at Luther Crest Bible Camp. All six of these core areas will be covered in six Friday-Saturday sessions over the course of two years. Other programs of education exist but must be approved by the SAM committee. SAMs may be approved to begin work before completing the training with approval from the Bishop and with close supervision from the SAM's mentor pastor. Please indicate the status of your training in each of the areas below:

Topic for Training	Completed? (yes or no)*	Will complete this through the NWMN Synod endorsed academy (yes or no)	Will complete this in another way – please specify:
Biblical Preaching			
Lutheran Theology/Confessions			
Worship			
Leadership			
Faith formation			
Pastoral care			

Contextual understanding is part of all classes

Date of last Boundary Training	(needs to be renewed every 3 years)
Date of last Anti-Racism Training	(needs to be renewed every 3 years)

^{*} For training that has already been accomplished, please provide a certificate, transcript, or some other record showing that training was accomplished.