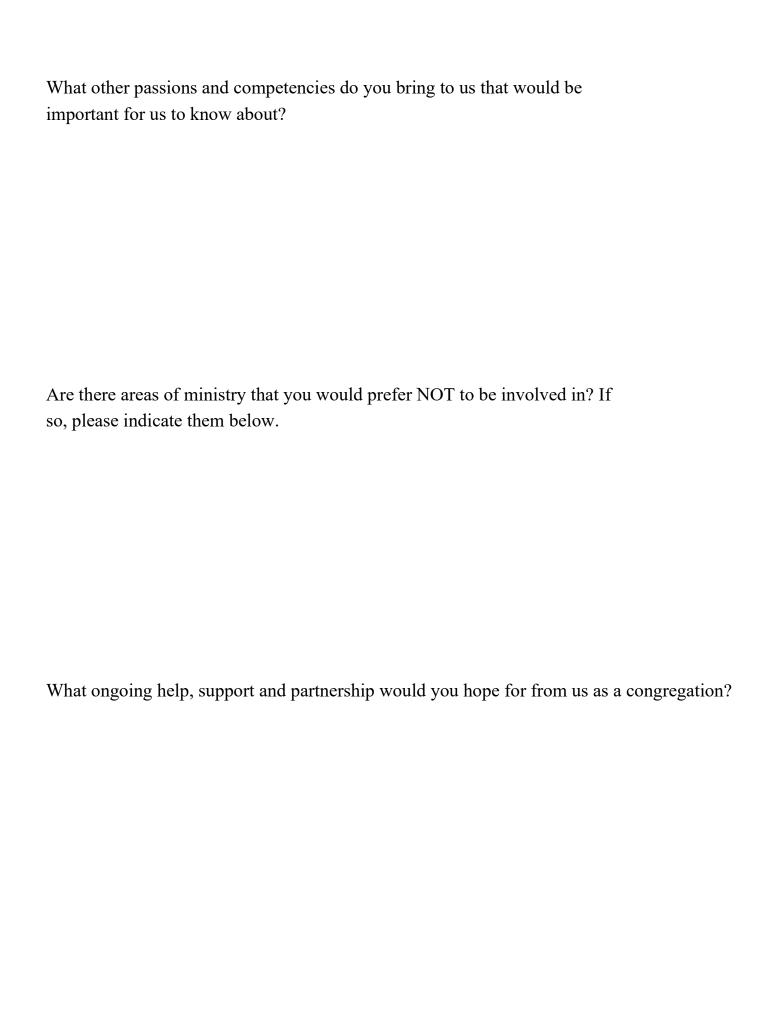
## **Synod Authorized Minister Profile**

Demographics and Background:
Name:
Email:
Phone:
Prior Work Experience:
Educational Background:
Ministry- specific degrees or certificates earned or courses accomplished:
Approaches to Ministry
Please briefly describe your philosophy of Ministry:

Tell us about your approach to preaching:
Describe how you would be present in pastoral care situations:
If teaching children or adults will be part of your ministry, please share what you hope to accomplish as a Christian Educator and what experience you may have had already:



Please comment on what you find attractive or compelling about this particular congregation and community.
Other comments:

References: An ELCA Pastor or Deacon		
Name:	Organization and Title:	
Phone Number:	E-mail:	
Lay Person (Current Ministry Setting <b>IF</b> applicable):		
Name:	Organization and Title:	
Phone Number:	E-mail:	
Lay Person (Non-Current Ministry Setting)		
Name:	Organization and Title:	
Phone Number:	E-mail:	
Supervisor/Colleague:		
Name:	Organization and Title:	
Phone Number:	E-mail:	