



Cross-cultural Ministry Center (Pastoral Certification)

SUPPLEMENTAL APPLICATION

Please send all forms
and requested items to:
gradadmissions@cui.edu

MARITAL/FAMILY INFORMATION

Check all that apply: ☐ Single ☐ Engaged ☐ Married ☐ Widowed ☐ Divorced ☐ Remarried

If applicable, please provide complete marital history of yourself and your spouse/fiancée up to the expected date of your first-time enrollment at Concordia University. Provide dates (month/year)

Name of spouse/fiancée _____

Names and ages of children _____

Is your wife in agreement with your plans to enter this seminary program? ☐ Yes ☐ No

Wife's signature _____

OCCUPATIONAL HISTORY

Give résumé of employment history, listing names, locations, types of positions held and years of employment, dating back to the beginning of your college/university training. A current résumé may be attached if desired.

Name of organization/business	Location	Position	Dates of employment

CONGREGATIONAL BACKGROUND

Date and place of your Baptism _____

Date and place of your Confirmation _____

1. Name/location of present Lutheran Church—Missouri Synod (LCMS) membership _____

2. Present church membership, if not LCMS _____

3. Previous church affiliations _____

4. Is your spouse/fiancée currently a communicant member of a LCMS congregation? ☐ Yes ☐ No

If not, does she plan to become a member of the LCMS by the time of your enrollment in the seminary program? ☐ Yes ☐ No

Explain:

CHURCH EXPERIENCES

List Christian ministry experience (church minister, missionary, Sunday school teacher, etc.). Note whether full-time (FT), part-time (PT) or volunteer (V). Briefly outline your responsibilities and positions in each ministry.

Church/Organization	Responsibility/Title FT/PT/V	Dates of Service

DEVELOPMENT OF YOUR SPIRITUAL LIFE AND YOUR VOCATIONAL DECISION

Explain briefly how the following three areas of influence have contributed to your spiritual life and vocational decision to serve the Lord as a missionary pastor. Attach a separate document if necessary.

1. Your family background

2. Your church experiences

3. Special experiences and individuals who have given you support and encouragement

PERSONAL INFORMATION

Health history: list any serious illnesses or injuries sustained within the last three years.

Rate the level of your present health: ☐ Excellent ☐ Above average ☐ Good ☐ Some problems ☐ Poor

Have you any personal or physical limitations or handicaps which are a matter of special consideration for placement at graduation into the pastoral ministry?

Because the Bible requires that a bishop must be “of good reputation,” we find it necessary to ask the following questions regarding your background. In an attached document, or in an interview with the CMC program director, you should feel free to help us understand your experience, together with its relationship to your projected ministry and the way you believe the Lord sees you now. Upon acceptance into the CMC, you will be asked to complete an FBI background check.

Please answer “yes” or “no” to each of the questions in the following section. If you answer “yes” to any of the questions, state on an accompanying and numbered sheet the details (dates, locations, individuals, organizations, for example) which will clarify and explain your answer.

1. Have you ever been accused (whether or not charged) by any person or entity of any crime or violation involving dishonesty, including, but not limited to perjury, theft, tax fraud, tax evasion, plagiarism, embezzlement or larceny? ☐ Yes ☐ No

Did any charge or conviction result from such an accusation? ☐ Yes ☐ No

2. Have you ever been accused (whether or not charged) by any person or entity of any crime or violation, including but not limited to distribution of pornography, child molestation, rape, statutory rape, attempted rape, prostitution, indecent exposure, sexual abuse, or soliciting a prostitute?

☐ Yes ☐ No Did any charge or conviction result from such an accusation? ☐ Yes ☐ No

3. Have you ever been accused (whether or not charged) by any person or entity of any crime or violation involving improper or dishonorable conduct, including, but not limited to bribery, driving while intoxicated, driving under the influence, child abuse or neglect, selling, purchasing or possessing an illegal substance? ☐ Yes ☐ No

Did any charge or conviction result from such an accusation? ☐ Yes ☐ No

4. Have you ever engaged in an extramarital affair? ☐ Yes ☐ No

5. Have you ever engaged in a homosexual act? ☐ Yes ☐ No Are you, or have you ever been evaluated by a physician, psychiatrist, psychologist or other qualified professional as being an active or latent homosexual, bisexual, transvestite, pedophile, exhibitionist or voyeur? ☐ Yes ☐ No

Do you have a gender identity disorder or other sexual behavior disorder? ☐ Yes ☐ No

6. Are you, or have you been, an alcoholic? ☐ Yes ☐ No

7. Have you used illegal drugs? ☐ Yes ☐ No Have you received, or are you receiving, therapy for drug abuse? ☐ Yes ☐ No

8. Have you ever been accused, suspended, disqualified or had disciplinary or ouster proceedings initiated against you as a member of any profession or organization? ☐ Yes ☐ No

9. Are you, or have you been, a party as defendant or plaintiff to any legal actions, either civil or criminal? ☐ Yes ☐ No

Are any provisions of a court order of judgement currently in force as a result of any legal actions, civil or criminal? ☐ Yes ☐ No

10. Have you ever been arrested for, charged with, or convicted of a felony? ☐ Yes ☐ No

Subpoenaed or requested to appear before any legal proceedings or investigating agency? ☐ Yes ☐ No

11. Are you, or have you ever been, under guardianship, declared a ward of the court or declared incompetent because of a mental illness; or committed, confirmed or treated in any institution for mental illness; or counseled, whether or not in an institution, by a therapist, psychiatrist, psychologist or psychoanalyst? ☐ Yes ☐ No

12. Have you been dismissed or asked to resign from any employment position you have held? ☐ Yes ☐ No

13. Are you aware of anything else in your personal background which would need to be considered as we identify and review your qualifications for the pastoral ministry of The Lutheran Church—Missouri Synod?

PERSONAL ASSETS FOR MINISTRY

Estimate the level of your current proficiency for the following personal strengths necessary for your ministry in the LCMS:

	None	Low	Fair	Good	Above Avg.	Excellent
Communication Skills						
Your Native Language:						
Other languages:						
English						
Personal skills and characteristics						
Ability to work with individuals and groups of people						
Showing love to others						
Showing initiative (getting new things started)						
Expressing your faith openly						
Expressing enthusiasm						
Showing responsibility						
Other Strengths						

MISSION POTENTIAL FOR MULTI-CULTURAL MINISTRY

State briefly what you know about the people of various cultural backgrounds in your community:

Location of group in your area

Their religious background and current religious affiliation

Their need for the Gospel

FINANCIAL INFORMATION

A seminary education requires an extensive financial commitment on the part of the student and the church body. Limited financial aid is available from Concordia, but we need to explore first the resources you have to help contribute to this important venture.

Resources: (estimate an amount)

1. Savings, other assets (explain) _____

2. Financial assistance from others

Family _____

Friends _____

Congregation _____

3. Projected employment during the seminary years:

Self (full-time, part-time) _____

Available skills _____

Wife (full-time, part-time) _____

Available skills _____

Household members ☐ Wife ☐ Children (number) _____ ☐ Others (relationship to you) _____

Housing needed? ☐ Yes ☐ No number of bedrooms needed _____

Explain _____

REFERENCES

Name position/title

Name position/title

Name position/title

Have you ever applied to any other LCMS seminary? ☐ Yes ☐ No

If so, which one and when? _____

ADDITIONAL COMMENTS OR HELPFUL INFORMATION

CERTIFICATION

I certify that, to the best of my knowledge, the information furnished on this application is true and complete. I agree that, if admitted, I will abide by the rules and regulations of Concordia University as contained in the current graduate catalog. I also understand that it is my responsibility to obtain the current graduate catalog before or after being admitted to the university and to be aware of the policies outlined therein.

Student's signature

Today's Date