

## WND G.I.F.T.S.: "Growing In Faith to Serve"

### **An innovative approach to leadership for mission in the ELCA.**

*The gifts he gave were that some would be apostles, some prophets, some evangelists, some pastors and teachers, to equip the saints for the work of ministry, for building up the body of Christ, until all of us come to the unit of the faith and of the knowledge of the Son of God, to maturity, to the measure of the full stature of Christ.*

Ephesians 4:11-13

## INFORMATION FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_

EMAIL: \_\_\_\_\_

CHURCH MEMBERSHIP: Name and address of Congregation of which you are a member:

\_\_\_\_\_

Pastor: Is this Pastor willing to serve as your mentor? Yes \_\_\_ No \_\_\_

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

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

Phone: \_\_\_\_\_

How do you participate in your congregation?

### PERSONAL INFORMATION:

Date of Birth: \_\_\_\_\_ Married: \_\_\_\_\_ Single: \_\_\_\_\_

If married, name of spouse: \_\_\_\_\_

Children: \_\_\_\_\_

Education history: (List high school and college with dates and degrees)

Occupational History: (List most recent first)

Special spiritual or leadership training: (such as Calling and Caring, Stephen Ministry, etc)

Autobiographical statement: Complete a brief autobiographical sketch including the significant events in your life, your Christian experience, and relationship to church. Please give your reasons for enrolling in GIFTS and the areas that you expect to grow and the ways in which you hope to serve your congregation.

SIGNATURE OF APPLICANT: \_\_\_\_\_  
ENDORSEMENT OF PASTOR/MENTOR: \_\_\_\_\_  
DATE: \_\_\_\_\_

PLEASE RETURN THIS FORM ALONG WITH THE \$25.00 APPLICATION FEE TO:

WND GIFTS  
%Jan Zook  
PO BOX 101  
Bowbells, ND 58721