BIOGRAPHICAL INFORMATION FORM Form 102

Name:	Middle			Last
11100				Last
Address:		City	State	Zip
Cell Phone: ()	Other Phone:	()		
Sex: Male Female	Birth Date:			
E-mail:				
Ethnic Origin: Asian	African American/Black	Hispanic/Latino	Oth	
American Indian	White/Caucasian	Native Hawaiian/Pa	acific Isia	ander
Conference:	District: _			
Local Church:				
Church Address:Street		City	State	Zip
Briefly describe your involve church activities, etc.	rement in your local church, such as	your leadership position	s, groups	you enjoy

Educational Background Dates Degree or # of Attended Credit Hours	work, church camps, we	arkehor	a outrouch		cai ciiui	on, sach as alsti	ct or annual conference
High School College Graduate School Theological Seminary Course of Study Adv. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Marriage Date: Grour children, if any: Matheded Credit Hours Attended Course of Study Credit Hrs: Middle Last Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Course of		———	os, outreach	, etc.			
High School College Graduate School Theological Seminary Course of Study Adv. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married, please indicate your spouse's information. Idme: First Middle Marriage Date: pouse's Occupation: Gour children, if any:							
High School College Graduate School Theological Seminary Course of Study Adv. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married, please indicate your spouse's information. Idame: First Marriage Date: pouse's Occupation: College Graduate School Tredit Hours Attended Credit Hours Fr. 4 Yr. 5 Adv. Course of Study Middowed Separated Divorced Marriage or more) Divorced Attended Credit Hours Attended Course of Study Credit Hrs: Middle Last Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours							
High School College Graduate School Theological Seminary Course of Study Adv. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married, please indicate your spouse's information. Idame: First Marriage Date: pouse's Occupation: College Graduate School Tredit Hours Attended Credit Hours Fr. 4 Yr. 5 Adv. Course of Study Middowed Separated Divorced Marriage or more) Divorced Attended Credit Hours Attended Course of Study Credit Hrs: Middle Last Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours Attended Course of Study Credit Hrs: Attended Credit Hours							
High School College Graduate School Theological Seminary Course of Study Adv. Course of Study Marrial Status: Single (never married) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Married Marriage Date: Single Marriage Date: Single Marriage Occupation: Single Marriage Date:							
High School College Graduate School Theological Seminary Course of Study Av. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Marriage Date: Grour children, if any:							
High School College Graduate School Theological Seminary Course of Study Av. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Marriage Date: Grour children, if any:							
High School College Graduate School Theological Seminary Course of Study Av. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Marriage Date: Grour children, if any:							
High School College Graduate School Theological Seminary Course of Study Adv. Course of Study Marrial Status: Single (never marriage) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Marriage Date: Spouse's Occupation: Morried (second marriage or more) Marriage Date: Marriage Date: Marriage Date: Mour children, if any:	Educational Backgro	und					
College Graduate School Theological Seminary Course of Study Adv. Course of Study Marital Status: Single (never married) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Middle Marriage Date: Grouse's Occupation: Marriage Date: Mour children, if any:	High School					Attended	Credit Hours
Graduate School Theological Seminary Course of Study Adv. Course of Study Marital Status: Single (never married) Married (first marriage) Married, please indicate your spouse's information. Name: First Middle Marriage Date: Grouse's Occupation: Mour children, if any:							
Theological Seminary Course of Study Adv. Course of Study Marital Status: Single (never married) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Jame: First Middle Marriage Date: Joouse's Occupation: Mour children, if any:							
Course of Study Adv. Course of Study Marital Status: Single (never married) Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Idame: First Middle Marriage Date: Jour children, if any:							
Adv. Course of Study Marital Status: Single (never married) Married (first marriage) Married (second marriage or more) Divorced f married, please indicate your spouse's information. Name: First Middle Marriage Date: Spouse's Occupation: Mour children, if any:			Yr. 1	1 Yr. 2 □	Yr. 3	¬ Yr. 4 □	Yr. 5 🗖
Marital Status: Single (never married) Married (first marriage) Married (second marriage or more) Divorced f married, please indicate your spouse's information. Name: First Middle Last Spouse's Occupation: Marriage Date: Jour children, if any:			11.1	J 1112 LJ			
Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Middle Marriage Date: Spouse's Occupation: Mour children, if any:	Tide (Course of Study					010	GIV 11151
Married (first marriage) Married (second marriage or more) Married, please indicate your spouse's information. Name: First Middle Marriage Date: Spouse's Occupation: Mour children, if any:	Marital Status:		Single (n	ever married)		☐ Wid	lowed
Married (second marriage or more) Divorced f married, please indicate your spouse's information. Name: First Middle Last Sirth Date: Poouse's Occupation: Marriage Date:		=		-		=	
f married, please indicate your spouse's information. Name:			Married	(first marriage)		Sep	arated
Name:			Married	(second marriage	or more)	Div	orced
Name:	f married, please ind	licate	vour spou	se's information.			
First Middle Last Birth Date: Marriage Date: pouse's Occupation: Your children, if any:	-		, F				
opouse's Occupation:						Last	
Spouse's Occupation: Your children, if any:							
Your children, if any:	Birth Date:			_ Marriage Date: _			
our children, if any:	nouso's Ossunation						
	pouse's occupation						
Child's Name Date of Birth Sex/Gender Education	our children, if any:	I I					
				Date of Birth	Se	x/Gender	Education
	Child's Name						
	Child's Name						
	Child's Name						

Additional dependents, if any:

Dependent's Name	Date of Birth	Sex/Gender	Education

Describe your community invorganizations, social clubs, se		

Your childhood family and other significant relatives:

Name	Relation	Age	Marital Status	Education	Sex/Gender	Occupation
	Father					
	Mother					

Mork Evnoriance (current o	mnlaymant provious	employment, and military expe	orionco if any
	inployment, previous	employment, and mintary expe	erience, ii any.j
ave vou previously served as	a local pastor, diacon	nal minister, deacon, or elder ir	n The United Method
hurch?	P	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
es No	If Voc What C	lanfaran as ?	
	if yes, what c	Conference?	
onference Relationship			
	DATE		DATE
Diaconal Minister		Provisional Member	
Local Pastor		Deacon in Full Connection	
Associate Member		Elder in Full Connection	
issociate Memori	L	Erect in 1 air connection	
ave you had a change in clerg	gy relationship with a	conference of The United Meth	nodist Church?
es No			
			
hange in Conference Relati	onship		
g	DATE		DATE
Discontinuance		Administrative Location	
Leave of Absence		Honorable Location	
Medical Leave		Retirement	
Termination by Annual		Withdrawal	
Conference Action		i	

Note: If additional space is needed please use a separate sheet of paper and attach this form.