**MINISTRY APPLICATION PROCESSING**

**\_\_\_\_\_\_\_ Church of the Nazarene**

Street address

City, State, Zip

*(For office use only)*

Name of ministry applicant:

 Completed/signed ministry application Date received:

 Photograph of applicant on file Date received:

 Interviewed by: Date interviewed:

 *(Interview questions/responses placed in file)*

 References contacted (minimum of 2 references) Date completed:

 *(completed reference check forms placed in file)*

 Criminal background check completed Date completed:

 *(background check findings placed in file)*

Applicant status Accepted Rejected

Reason for rejection:

 Safety Training Completed Date:

 Annual Training/Review

 Date completed:

 Date completed:

 Date completed:

 Date completed:

 Date completed: