**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: