Cross Country Christian Community

CLERGY APPLICATION

Name: _____ Name You Prefer To be Called _____

Address: _____
Street Address Apt/Unit #

_____
City State Zip Code

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

FOURTH DAY BACKGROUND AND EXPERIENCE

When & Where did you attend your Walk/Flight (or other Fourth Day Weekend)? (please specify)

_____

Have you attended the 4C Clergy Training conducted by the Community Spiritual Director?

Yes _____ No _____ If yes, please give the date you attended _____

Which Walks/Flights have you served on as a Layperson (including the Community Name, the team position you served, and any Layperson's talks that you have given)? _____

_____

_____

_____

Have you served on any previous Walks/Flights as a Clergyperson? Yes _____ No _____
If yes, please give the name of the Community, the Walk/Flight in which you served, and any Clergy talks that you have given. _____

_____

_____

_____

Are you currently a member of a Reunion / Accountability Group? Yes _____ No _____

CHURCH RELATIONSHIP

Are you an ordained minister? Yes _____ No _____

If yes, when & where were you ordained? _____

_____

(A copy of your ordination certificate must be provided with this application. If your church/denomination/ministry does not issue ordination or licensing certificates, then please provide a letter or statement of good standing from the overseeing authority of your church or denomination; including a statement giving you authorization to serve Holy Communion.)

If no, are you a licensed minister and in the process of becoming ordained? Yes _____ No _____

What ordaining/licensing Body ordained/licensed you? _____

To which church/denomination/ministry are you currently accountable to or serving? _____

_____

What role/position do you currently hold? (Lead Pastor, Associate Pastor, Youth Minister, Chaplain, ect.) _____

Is your current ministry role full time or part time? Full Time _____ Part Time _____

EDUCATIONAL BACKGROUND

High School: _____
Name City State

From: _____ To: _____ Did you graduate? Yes _____ No _____

College/University: _____
Name City State

From: _____ To: _____ Degree? _____

Seminary/Divinity School: _____
Name City State

From: _____ To: _____ Degree? _____

Other: _____
Name City State

From: _____ To: _____ Degree? _____

MOTIVATION

Why do you desire to become a Clergy member within the Cross Country Christian Community?

_____

_____

_____

_____

"Serving as a Clergy member within the Cross Country Christian Community is a privilege, and not a right." What are your thoughts about this statement? _____

_____

_____

"Serving as a Clergy member within the Cross Country Christian Community is a calling from God." Do you agree with this statement? Yes _____ No _____ Why or why not? _____

_____

_____

If you are selected and approved to serve as a 4C Clergy member, will you:

* Agree to operate under and abide by the authority and direction of the 4C Board of Directors? Yes _____ No _____
* Agree to work within the provided structure; including utilizing the provided talk outline, abiding by and remaining sensitive to the established time limits, and preview your talk during one of the three team meetings? Yes _____ No _____
* Agree that the primary responsibility of a 4C Clergy member during a Walk or Flight is to offer and provide Spiritual guidance, direction, and counsel, as needed, to pilgrims in order to assist them in their relationship with Christ? Yes _____ No _____

EXPECTATIONS

Team formation consists of three team meetings, prior to the Walk Weekend. All Clergy members are expected to attend all three meetings, and to preview their talk during one of the meetings. Team meetings that you may have to miss, due to pastoral or ministerial duties and responsibilities, must be coordinated with the Weekend Spiritual Director and the Weekend Lay Director.

It is imperative that at least one clergy member (in addition to the Weekend Spiritual Director) commit to remaining throughout the entire 72-hour Walk Weekend for purposes of counseling, encouragement, and support.

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

Should this application lead to my acceptance by the 4C Community Spiritual Director, as well as the Board Of Directors, I understand that any false or misleading information that I have given on this application or during my interview may result in my disqualification and release.

Signature: _____ Date: _____

After completing this application, please mail or email, along with the required documentation, to the 4C Community Spiritual Director:

Dave Harrison
206 North Avenue M
Haskell, TX 79521
pastordave811@gmail.com