FORM 3	
Date:	

PRE-INTERVIEW ANNUAL CONSULTATION REPORT GROWTH AND DEVELOPMENT IN THE LAST 12 MONTHS

	(NAME OF INQUIRER/CANDIDA	ΓE)				
(CURRENT MAILING ADDRESS)			(CITY)		·	(STATE)
PHONE #: _	CELL #		FAX#:		E-MA	L:
DI EACE D		X 7		TTO.		
PLEASE K	ETURN THIS FORM B	Y	(DATE)	10	()	MODERATOR)
FOR YOUR	R ANNUAL CONSULTA	TION AT		AM/PM ON		
					(DATE)
*OK:						
I.	ATTACHMENTS HAVE YOUR THEOLOGICA A. TRANSCRIPT OF YOUR B. FIELD EDUCATION OR	GRADES			СРМ Морі	ERATOR:
II.	INFORMATION UPD. A. HAVE YOU PASSED THE B. WHEN WILL YOU TAKE ORDINATION EXAMS: IF INTEND TO TAKE: BIBLE CONTE BIBLE EXEGE	IE BIBLE CONTE E THE ORDINATI YOU HAVE PASS NTWO	ON EXAMS? ED, MARK WITI	H A "P." OTHER	VISE, INDIC	
III.	CURRENT REFERENCE	•	RUTUSEFUL	WHEN AN INOU	IRER/CAND	NIDATE HAS
	BEEN LIVING OUTSIDE T REFERENCES COULD IN INQUIRER'S/CANDIDATE	CLUDE SEMINA	F THE PRESBY ARY FACULTY	TERY FOR AN E	KTENDED 1	TIME.
	REFERENCES COULD IN INQUIRER'S/CANDIDATE	CLUDE SEMINA E'S CHURCH, O	F THE PRESBY ARY FACULTY	TERY FOR AN E. STAFF, PASTOR (KTENDED 1 OR ELDER I	TIME.
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ADDRESS:	REFERENCES COULD IN INQUIRER'S/CANDIDATE	CLUDE SEMINA E'S CHURCH, OI (FIRST) (CITY)	F THE PRESBY ARY FACULTY R MENTOR.)	TERY FOR AN EX	KTENDED TO RELDER F	TIME. FROM (ZIP CODE)
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ADDRESS: RELATIONS CELL #:	REFERENCES COULD IN INQUIRER'S/CANDIDATE ITTLE) (STREET OR PO BOX) SHIP: FA G HAVE YOU KNOWN T	CLUDE SEMINA E'S CHURCH, OI (FIRST) (CITY) X #:	F THE PRESBY ARY FACULTY R MENTOR.) PHONE #	TERY FOR AN EXTAFF, PASTOR (LA	STATE)	TIME. FROM (ZIP CODE)
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PDS# 72-234-05-001 Rev. 3/05

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NAME:	TTI F)		(FIRST)		(LAST)	
			(imor)		(DAGT)	
ADDRESS:	(STRE	ET OR PO BOX)	(CITY)		(STATE)	(ZIP CODE)
RELATIONS	SHIP: _		P	HONE #:		
CELL #:	FAX #:		FAX #: E-MAIL:			
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	A.	EDUCATION FOR	R MINISTRY			
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FORM 3

B. **SPIRITUAL DEVELOPMENT**

BRIEFLY DESCRIBE YOUR SPIRITUAL DISCIPLINES, INCLUDING YOUR PARTICIPATION IN THE WORSHIP AND MISSION OF A PRESBYTERIAN CONGREGATION.

FORM 3	
Date:	

C. <u>Interpersonal Relations</u>

DESCRIBE YOUR RELATIONSHIP WITH YOUR PEERS, AUTHORITY FIGURES, FAMILY, AND OTHERS WHO ARE SIGNIFICANT TO YOU. WHAT ARE THE IMPLICATIONS OF THOSE RELATIONSHIPS FOR YOUR MINISTRY?

D. Personal Growth

DESCRIBE RECENT EXPERIENCES OF EMOTIONAL IMPACT, IF ANY, AND HOW YOU DEALT WITH THEM.

COMMENT ON AREAS IN WHICH YOU BELIEVE YOU ARE GROWING AND IDENTIFY AREAS IN WHICH YOU FEEL THE NEED FOR PROGRESS.

E. PROFESSIONAL DEVELOPMENT

DESCRIBE YOUR PARTICIPATION IN FIELD EDUCATION OR OTHER EXPERIENCES WHICH HAVE CONTRIBUTED TO YOUR PROFESSIONAL DEVELOPMENT.

VI. LIST OTHER ISSUES WHICH YOU WISH TO DISCUSS WITH THE COMMITTEE INCLUDING FINANCIAL NEEDS, FAMILY CONCERNS, ETC.

VII. REQUEST FOR EXCEPTIONS AND WAIVERS (G-14. 0313) (E.G., EDUCATIONAL REQUIREMENTS, ORDINATION EXAMS, TIME REQUIREMENTS, ADDITIONAL PRESBYTERY REQUIREMENTS). INDICATE YOUR REASONS FOR THIS REQUEST.

VIII. IF THIS ANNUAL CONSULTATION COVERS THE TIME PERIOD OF THE SECOND YEAR OF THEOLOGICAL EDUCATION, WRITE A PRELIMINARY STATEMENT OF FAITH (G-14.0309 C (3)) AND ATTACH TO THIS REPORT.