

PASTORAL SEARCH ANNOUNCEMENT

The Followers of Christ Baptist Church of Oklahoma City, Oklahoma is seeking a pastor who will serve as spiritual leader and overseer of the church. This church was organized in 1979. We are affiliated with the National Baptist Convention, USA, Inc. and the East Zion District Association of Oklahoma. We are a loving, Christ centered, spirit filled and family oriented congregation.

The applicant should be an effective communicator, gifted teacher, skilled counselor, and able to interact effectively with our multi-generational congregation and should demonstrate an understanding of church management. A seminary trained leader with pastoral experience is desired. This leader must have a divine calling and fully embrace the Baptist Doctrine.

In order to obtain a copy of the application, go to the Followers of Christ website:
www.focbc.org/pastorsearch.html

Resumes and a completed application will be accepted August 1 through August 31, 2008.
Please send these items to:

Followers of Christ Baptist Church
Pastoral Search Committee
PO Box 11506
Oklahoma City OK 73136
Email: pastorsearch@focbc.org

The committee will acknowledge receipt of all applications and resumes and all information presented will be treated as confidential.

FOLLOWERS OF CHRIST BAPTIST CHURCH

Mailing Address:
P.O. Box 11506
Oklahoma City, OK 73136

Church Address:
1125 Northeast 36th Street – Oklahoma City, OK 73111
Telephone: (405) 427-8873 or (405) 427-0151

Pastoral Search Committee Application

This form will be copied so that it may be read by various members of the pastoral search committee. To ensure the legibility of the copies please type or write clearly using black ink. None of this information will go beyond the search committee without your permission. Use additional sheets for more information if needed.

Last name _____ First name _____ Middle initial _____

Street Address _____

City _____ State _____ Zip _____

Telephone Home (____) _____ Cell (____) _____ Work (____) _____

Email address _____

THE FOLLOWING INFORMATION WILL BE TREATED AS CONFIDENTIAL.

Date of Birth _____ Birthplace _____ Gender Male Female

Licensed? Yes No Year _____ Name of church _____

City/state/Zip _____

Ordained? Yes No Year _____ Name of church _____

City/State/Zip _____

Marital Status Married Married (previously divorced)
 Single (never married) Single (previously married)
 Widow

Name of spouse _____

Children's Name

Age

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Educational History: This section must be accurate and complete.

High School Attended _____

Location (City/State) _____

Years Attended _____ Graduated: Yes No GED: Yes No

UNIVERSITY/COLLEGE (Undergraduate, Graduate, Post Graduate list all attended):

Name _____

Location – City/State _____

Major Course or Subject _____

Attended from –to (Mo-Yr) _____ Graduated Yes No Degree _____

THEOLOGICAL/SEMINARY TRAINING

Name _____

Location (City/State) _____

Attended from – to (Mo-Yr) _____ Graduated Yes No Degree _____

BUSINESS, TECHNICAL/TRADE/VOCATIONAL

Name _____

Location (City/State) _____

Attended from – to (Mo-Yr) _____

Title of Program or subjects taken _____

MILITARY TRAINING

Branch of Service _____ From _____ To _____

Present military affiliation _____

Reserve (active) _____ Reserve (inactive) _____

Kind of training and duty while in service _____

Other Education/Training _____

Are you presently attending school? Yes No

If yes, name of school _____

City and state _____ Major Field of Study _____

PASTORAL EXPERIENCE

Church _____ Job Title _____

Address (Street, City, State, Zip) _____

Duties: _____

From _____ to _____

Church _____ Job Title _____

Address (Street, City, State, Zip) _____

Duties: _____

From _____ to _____

Church _____ Job Title _____

Address (Street, City, State, Zip) _____

Duties: _____

From _____ to _____

COMMUNITY/CIVIC INVOLVEMENT

Organization/Agency Name _____

Address (Street, City, State, Zip) _____

Your Position _____ Dates of Association _____

Contact Person _____ Title _____ Phone _____

Responsibilities _____

Organization/Agency Name _____

Address (Street, City, State, Zip) _____

Your Position _____ Dates of Association _____

Contact Person _____ Title _____ Phone _____

Responsibilities _____

Organization/Agency Name _____

Address (Street, City, State, Zip) _____

Your Position _____ Dates of Association _____

Contact Person _____ Title _____ Phone _____

Responsibilities _____

PASTORAL VISION: Please describe your Pastoral Vision. (Additional comments may be made on a separate sheet)

Why are you interested in The Followers of Christ Baptist Church? (Additional comments may be made on a separate sheet)

Church related References: Name three (3) persons who are not related to you and who have definite knowledge of your pastoral/ministerial qualifications.

1. _____ Relationship _____ Telephone _____

Address _____

2. _____ Relationship _____ Telephone _____

Address _____

3. _____ Relationship _____ Telephone _____

Address _____

Character References: Name three (3) persons who are not related to you and will give a character reference

1. _____ Relationship _____ Telephone _____

Address _____

2. _____ Relationship _____ Telephone _____

Address _____

3. _____ Relationship _____ Telephone _____

Address _____

Attach Photo Here

I certify that information contained in this application is true and complete. I authorize the verification of any or all information listed above and willing to submit to a background check.

Signature _____

Date _____