

In-Care for Ordination Checklist

First Name: _____

Last Name: _____

[Required documentation must be submitted to the Regional Office 30 days prior to each appointment.]

PRIOR TO FIRST MEETING

Required Documents	Candidate Initiates	Regional Office Initiates	Completion Date
<input type="checkbox"/> In-Care for Ordination Application	X		
<input type="checkbox"/> Psychological/Vocation Assessment	X		
<input type="checkbox"/> Completed Search and Call Profile with Background Check		X	
<input type="checkbox"/> Signed Ethics Acknowledgment Card	X		
<input type="checkbox"/> Signed Disclosure Form	X		
<input type="checkbox"/> Spiritual Autobiography Paper	X		
<input type="checkbox"/> Endorsement Letter from Sponsoring Congregation	X		
<input type="checkbox"/> Regional Minister Endorsement		X	
<input type="checkbox"/> Appointment with Ministry Committee – Date/Time:		X	
<i>Comments:</i>			

PRIOR TO SECOND MEETING

Required Documents	Candidate Initiates	Regional Office Initiates	Completion Date
<input type="checkbox"/> Concept of Ministry Paper	X		
<input type="checkbox"/> History and Polity Certificate and Reflection Paper	X		
<input type="checkbox"/> Reminder to do Clinical Pastoral Education (CPE)		X	
<input type="checkbox"/> Appointment with Ministry Committee – Date/Time:		X	
<i>Comments:</i>			

PRIOR TO THIRD MEETING

Required Documents	Candidate Initiates	Regional Office Initiates	Completion Date
<input type="checkbox"/> Concept of Church Paper	X		
<input type="checkbox"/> CPE Certificate and Supervisor Letter	X		
<input type="checkbox"/> Appointment with Ministry Committee – Date/Time:		X	
<i>Comments:</i>			

PRIOR TO FOURTH MEETING (ORDINATION INTERVIEW)

Required Documents	Candidate Initiates	Regional Office Initiates	Completion Date
<input type="checkbox"/> Official Transcript from Seminary	X		
<input type="checkbox"/> Letter of Recommendation from Seminary	X		
<input type="checkbox"/> Letter from Sponsoring Congregation's Ordination Committee	X		
<input type="checkbox"/> Letter from Presiding Minister of Sponsoring Congregation	X		
<input type="checkbox"/> Appointment with Ministry Committee – Date/Time:		X	
<i>Comments:</i>			