



Board of Ordained Ministry

West Virginia Conference

THE UNITED METHODIST CHURCH

BIOGRAPHICAL INFORMATION FORM Form 102

Name: _____
First Middle Last

Address: _____
Street City State Zip

Cell Phone: (____) _____ Other Phone: (____) _____

Sex: Male Female Birth Date: _____

E-mail: _____

Ethnic Origin:

Asian African American/Black Hispanic/Latino Other:
American Indian White/Caucasian Native Hawaiian/Pacific Islander

Conference: _____ District: _____

Local Church: _____

Church Address: _____
Street City State Zip

Briefly describe your involvement in your local church, such as your leadership positions, groups you enjoy, church activities, etc.

Describe your church involvement in activities beyond your local church, such as district or annual conference work, church camps, workshops, outreach, etc.

Educational Background

	Dates Attended		Degree or # of Credit Hours	
High School				
College				
Graduate School				
Theological Seminary				
Course of Study	Yr. 1	Yr. 2	Yr. 3	Yr. 4 Yr. 5
Adv. Course of Study				Credit Hrs:

Marital Status:

Single (never married)

Widowed

Married (first marriage)

Separated

Married (second marriage or more)

Divorced

If married, please indicate your spouse's information.

Name: _____
First Middle Last

Birth Date: _____ Marriage Date: _____

Spouse's Occupation: _____

Your children, if any:

Child's Name	Date of Birth	Sex/Gender	Education

Additional dependents, if any:

Dependent's Name	Date of Birth	Sex/Gender	Education

Describe your community involvement and volunteer work, such as participation in community organizations, social clubs, service agencies, and other non-church-related volunteer service:

Your childhood family and other significant relatives:

Name	Relation	Age	Marital Status	Education	Sex/Gender	Occupation
	Father					
	Mother					

