

## Faith Group Information Form

Applicant's Name: \_\_\_\_\_

Faith Group Name: \_\_\_\_\_

Faith Group Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Date: \_\_\_\_\_

Please provide the following information about your faith group and include printed materials and other documentation.

**Is this a totally independent congregation, or does it belong to a loose organization of like-minded independent congregations?**  **Yes, totally independent**  **No, part of a larger institution:** \_\_\_\_\_

Please answer the following questions (use a separate sheet of paper if necessary):

1. When was the congregation/faith group founded?
2. How many members belong to the congregation/faith group?
3. What is the structure and organization of the congregation/faith group?
4. Is this group recognized as a congregation by the community?
5. How is the clergy leadership obtained for the congregation?
6. How are persons prepared and trained for ministry and pastoral care service?
7. What are the procedures followed by the congregation in ordaining and endorsing clergy for pastoral care service (chaplaincy)?
8. What are the procedures for commissioning and endorsing laypersons for pastoral care service?
9. What other information can you share to give us a well-rounded picture of your faith group?