North Arkansas District: Prospective Pastor Questionnaire

Please insert a current color photo of yourself & your family in the space to the left.

You may use Microsoft Word to fill in the form (each line will expand as you type), then return it electronically to admin@narknaz.com.

Answer all questions below or write “N/A” if the question does not apply to your situation. Thank you!

Name:

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Spouse:

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Home Address:

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Email:

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Phone Number:

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Ministerial Status:

[ ]  Elder [ ]  Deacon [ ]  District Licensed [ ]  Local Licensed

What is your current place of ministry?

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How long have you been at your current place of ministry?

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What year and on what district did you receive your first district license?

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What year and on what district were you ordained?

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Describe your sense of God’s call on your life.

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Describe how you tend to your own spiritual growth and health.

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Describe how you and your spouse approach the pastoral role together.

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How would you describe your personality?

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What are your unique ministerial interests, spiritual gifts, and strengths?

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Choose seven of the following traits that describe you best. Please rank those seven from the highest (1) to the lowest (7). ***Only one*** check should be in marked in each column.

1. 2 3 4 5 6 7

Administration [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Community Leader [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Compassionate Ministry [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Counseling [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Creative [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Denominational [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Discipleship [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Equipper [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Evangelism [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Leader among Leaders [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Managing Leader [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Missions [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Personal Interaction [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Preacher [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Small Groups [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Teacher [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Vision [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Worship [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

Knowing your calling, gifts, interests, and personal “comfort zones”, in what setting(s) do you feel you would be most effective?

[ ]  Inner City [ ]  Urban [ ]  Suburb [ ]  Small Town. [ ]  Other

What books have you read in the past two years and what impact did they have on your ministry?

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What seminars have you attended in the past two years and what impact did they have on your ministry?

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What websites do you frequent that are most helpful in ministry?

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What media/technology do you currently use as part of the life of the church?

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Describe yourself as a preacher.

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Have you ever been involved in planting a church?

[ ]  Yes [ ]  No

Has your church paid all allocations in full for the last three years?

[ ]  Yes [ ]  No

Describe your activities in the area of discipling believers.

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Describe your activities in your development of prayer ministry.

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Describe your activities in the area of evangelism, personally and in your church.

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Describe your leadership style.

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Have you ever had staff?

[ ]  Yes [ ]  No

Describe your conflict management style.

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What has been the most fulfilling for you in ministry?

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Describe the three most significant programs, activities, or ministries of your ministry.

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Describe your schedule for a “typical” work week.

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What is the greatest challenge facing the Church today?

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What is your leadership involvement beyond the local church?

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Compensation Information

*\*If not applicable for any question, please type “N/A”.*

**Salary**

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| --- | --- |
| Cash |       |
| Housing Allowance |       |
| Total Salary |       |
| **Employee Benefits** |  |
| Social Security |       |
| Health Insurance |       |
| Dental Insurance |       |
| Life Insurance |       |
| Cash Bonuses/ gifts from church funds |       |
| Number of holiday days |       |
| Vacation (weeks/days) |       |
| Annuity or Other Retirement |       |
| **Expense Reimbursements** |  |
| Automobile/Mileage |       |
| Continuing Education |       |
| Library/Books/ Journals/ Magazines |       |
| Hospitality |       |
| Other:  |       |

Family Information

*\*Complete if applicable (please have your spouse complete this sheet where practical).*

Describe your spouse’s background: birthplace, church experiences, education, etc.

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When and where were you married to your spouse?

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Describe spouse’s involvement in the ministry of the church.

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What are your spouse’s gifts, strengths, and abilities?

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What are your spouse’s interests outside of ministry?

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List the name and ages of your children.

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