Ordination Request Form

1. Candidate's Name: _____
2. Candidate's Age: _____
3. Candidate's Marital Status: ☐ Single ☐ Married Spouse's Name:_____
4. Candidate's Pastor: _____
5. Candidate's Church: _____
6. Length of Membership in Current Church: _____ Years
7. Date Licensed: _____ Licensing Church: _____
8. Purpose of Ordination for this Candidate:
   - ❑ Called to the Pastorate of a Baptist Church _____
   - ❑ Called to the Chaplaincy _____
   - ❑ Called to an area of ministry in home church or will serve in a capacity under the auspices of his home church. Briefly describe:

     _____

     _____

     _____ _____

     Requesting Pastor's Signature Date

☐ Candidate Approved for Ordination Examination
Chief Catechizer Assigned: _____

☐ Candidate Not Approved for Ordination Examination
Reason:

_____
_____
_____
_____

_____ _____

Signature of BPMC President Date