



American Baptist Churches of Indiana and Kentucky
Resume For Professional Ministry
IT DOES NOT REPLACE AN ABPS PROFILE

Date Completed: _____

FULL NAME	First	Middle	Last
Complete Mailing Address			
Phone Number		E-mail Address	

EDUCATION		
List the educational degrees you have completed, giving both the degree, school or sponsoring institution, and the year in which it was (or will be) complete.		
Year	Degree	School or Sponsoring Institution (with city & state located)

PROFESSIONAL INFORMATION		
List your professional credentials as a minister. This would include date of licensing, ordination, and/or recognition of ordination, and the organization/congregation which licensed/ordained/recognized. Also, list the church where you are currently listed as a member.		
Year	Credential	Organization/Church Name (City & State Located)
	Licensed	
	Ordained	
	Ordination Recognition	
	Membership	

WORK HISTORY		
List both your ministry and other work history, starting with your current or most recent position.		
Position	Year	Organization/Church Name

REFERENCES			
List at least three professional references who are familiar with our ministry. One of these references should be your region minister or the executive minister of the ABC Region in which you serve or live.			
INFO	Ref. #1 Executive/Region Minister	Reference #2	Reference #3
Name			
Address			
Phone			
Email			

PERSONAL NARRATIVE

In your own words, write a narrative that will introduce you as a person in ministry. You may include anything you want. You might describe such things as: Your faith journey, call to ministry, vision and goals for the church, leadership style, specific accomplishments that highlight your ministry, and/or work style and decision making style. This narrative should be no more than 300 words and fit in the space below. Please use 12 point type.

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GEOGRAPHIC LIMITS

Please indicate how far (in miles) you would be willing to travel from your current residence to serve a congregation.

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PERSONAL INFORMATION (Optional)

Your Full Name	Spouse's Name (if married)	Number of Children plus name & birth year
Your Birth Date	Spouse's Occupation	

ENCLOSURES

Please be sure you have signed and included the following with this resume. These must be on file before Regional Staff will be able to share your resume with search committees.

<input type="checkbox"/>	ABCUSA Ministers' Council Covenant and Code of Ethics
<input type="checkbox"/>	ABC/IN-KY Misconduct Disclosure Form

WHERE TO RETURN ALL INFORMATION:

Mail: ATTN: Becky Septoski 65 Airport Parkway, Suite #120 Greenwood, IN 46143	Email: beckyseptoski@abc-indiana.org
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