



TEACHING MINISTRY CERTIFICATION

APPLICATION

Send

- Application
- Official Transcripts
- Pastor's Recommendation
- Teaching Evaluation

To: Martin Luther College

Ministry Certification Office

1995 Luther Ct.

New Ulm MN 56073

Phone: 507.354.8221

Fax: 507.354.8225

Email: teachingministrycert@mlc-wels.edu

Web Address: mlc-wels.edu/ministry-certification/

Seeking certification as

Teacher K-16

Early Childhood Teacher

Early Childhood Director

BIOGRAPHICAL DATA

Name _____ Phone _____
Last First Middle Maiden

Address _____ City State Zip
Number and Street

Birthdate _____ Social Security Number _____
Month Day Year

Marital Status: Single Married Widowed Widowed-remarried Separated or divorced Divorced-remarried

Spouse _____ Birth Yrs of Children _____
Last First Middle

Email _____

Racial/Ethnic Background (Used for State and Federal Government Reports) *(optional)*

Nonresident Alien

Race and Ethnicity unknown

Hispanics of any race

For non-Hispanic only:

American Indian or Alaska Native

Asian

Native Hawaiian or other Pacific Islander

Black or African American

White

Two or more races

CHURCH MEMBERSHIP

Name of Congregation _____ City _____ Synod _____

How long a member of this congregation? _____ Is spouse a member? _____

Pastor* _____
Name Address City State Zip

Year of your confirmation _____ Year of spouse's confirmation _____

EDUCATIONAL HISTORY

High School Graduation: _____
MM/YYYY State High School Name City

Colleges - Universities: _____
Name of Institution Dates attended

_____ Name of Institution Dates attended

_____ Name of Institution Dates attended

Earned degrees: _____
Kind Institution Year Major Minor

_____ Kind Institution Year Major Minor

EMPLOYMENT HISTORY
(Since first earned degree)

Past Employer _____ Position _____ City/State _____ Dates _____

Past Employer _____ Position _____ City/State _____ Dates _____

Present employer _____ City _____ State _____

Position description _____
_____ Date Begun _____

If teaching in a WELS setting indicate if your position is hired or called _____

MILITARY SERVICE

Please check the box that applies

- Veteran or active military Active reserve or National Guard member Not a veteran or in active military

OTHER INFORMATION

Have you ever been convicted of a felony? _____ Yes _____ No
If yes, please explain _____

Have you ever been convicted of any kind of sexual misconduct or sexual or physical abuse? _____ Yes _____ No
If yes, please explain _____

Have you read and do you understand the *Guidelines for Ministry Certification of Teachers*? _____

Are you aware that successful completion of the Ministry Certification Program does not imply that a call from a school in the Synod will automatically or immediately follow? _____ Are you in agreement with the policies? _____

State reasons for seeking Ministry Certification _____

Date _____ Applicant's signature _____

REMINDER - OTHER DOCUMENTS NEEDED

1. Pastor's recommendation
2. All official college and university transcripts
3. Recent Teaching Evaluation

**Martin Luther College's Annual Security Report is public safety information about our campus and can be accessed by visiting:
<https://mlc-wels.edu/student-life/annual-security-and-fire-report/>*

For office use only.

- | | |
|--|---------------------|
| 1. Pastor's recommendation | Date Received _____ |
| 2. All official college and university transcripts | Date Received _____ |
| 3. Recent Teaching Evaluation | Date Received _____ |

Director's Acceptance Signature _____

Date _____