TEACHING MINISTRY CERTIFICATION APPLICATION

www.mlc-wels.edu/ministry-certification/

WELS Christ's Love, Our Calling.

If in a called position, send these documents:
- Application
- Official Transcripts from:
  - ◊ WLC
  - ◊ BLC
  - ◊ Early Childhood Credential

If NOT in a called position, send these documents:
- Application
- Pastor's recommendation
- All official college and university transcripts
- Recent Teaching Evaluation

BIOGRAPHICAL DATA

Name: _____ Phone: _____
Last First Middle Maiden

Address: _____
Number and Street City State Zip Code

Birthdate: _____ Social Security Number: _____
Month Day Year

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

Spouse: _____ Birth years of children: _____
Last First Middle

Email: _____

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

For non-Hispanic only:

◯ Nonresident Alien
◯ Race and Ethnicity unknown
◯ Hispanics of any race
◯ American Indian or Alaska Native
◯ Asian
◯ Native Hawaiian or other Pacific Islander
◯ Black or African American
◯ White
◯ Two or more races

SEEKING CERTIFICATION AS:

◯ **Teacher K-16** ◯ **Early Childhood Teacher** ◯ **Early Childhood Director**

CHURCH MEMBERSHIP

Name of congregation: _____ City/State: _____ Synod: _____

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

Pastor _____

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

EDUCATION HISTORY

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

College/University _____
Name of Institution Dates attended

_____
Name of Institution Dates attended

_____
Name of Institution Dates attended

Earned degree _____
Kind Institution Year Major Minor

_____
Kind Institution Year Major Minor

EMPLOYMENT HISTORY *(since first earned degree)*

Current Employer	Position	City / State	Starting Date
Past Employer	Position	City / State	Dates
Past Employer	Position	City / State	Dates

Current Position description _____

_____

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 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 _____

For K-16 Teaching Certification: Have you read and do you understand the *Guidelines for Ministry Certification of Teachers*? ○ Yes ○ No

For Early Childhood Teaching Certification: Have you read and do you understand the *Guidelines for Ministry Certification of Teachers*? ○ Yes ○ No

For Early Childhood Directors Certification: Have you read and do you understand the *Guidelines for Ministry Certification of Directors*? ○ Yes ○ No

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? ○ Yes ○ No Are you in agreement with the policies? ○ Yes ○ No

State reasons for seeking Ministry Certification _____

_____

Applicant's Signature _____ Date _____

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

Send all necessary documents to: ministrycert@mlc-wels.edu *(preferred method)*

Or mail to:

Martin Luther College
Attn: Ministry Certification Office
1995 Luther Ct.
New Ulm, MN 56073

For office use only:

- □ CALLED
  - □ Application
  - □ Transcripts
- □ NOT CALLED (Hired)
  - □ Application
  - □ Pastor's recommendation
  - □ All official college / university transcripts
  - □ Recent teaching evaluation

Director's Acceptance Signature _____ Date _____

Ministry Cert Office Phone: 507-354-8221 Fax: 507-354-8225