

STATE ADVISORY COMMITTEE ON ORDINATION

Candidate Worksheet/Checklist



Name:	
Address:	
City/State:	
Zip:	
Phone(s):	
E-mail:	
Sponsor's Name:	
Address:	
City/State:	
Zip:	
Date Application Letter Received:	

	Met with ABC of Ohio Region Minister	
	License Date/Church.	
	Letter from Association Pastoral Relations Committee.	
	Copy of Seminary Degree and/or Transcript.	
	Letter from Present Church Board of Deacons.	
	American Baptist History and Polity Course.	
	Code of Ethics Signed and on File.	
	Ordination (Theology) Paper Received.	
	Ordination Certificate Received.	
	Midwest Career Center	
	Date of Meeting with SAC.	
	Action of SAC:	
	Date of Ordination:	
	ABPS Registry Notified:	

Notes/SAC Recs/Action: