

SOUTHWESTERN UNION CONFERENCE

P. O. Box 4000 • Burleson, Texas 76097

Ordination Profile

Name:			Age:	
Marital Status:		Spouse's Name:		
Children's Nam	nes and Ages: me		Age	
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_				
Education:				
Work Experien	ce:			
<u>Ye</u> . 1.		<u>Baptisms</u>	<u>Church</u>	
2.				
3.				
4.				
5.				
6.				
Work Experien	ce Other Than M	linisterial:		
Summary of Ex	camination:			
Signature of Co	onference Office	r or Ministerial Secretary	Date of Appr	

Executive Committee