**Pulpit Supply Application Form (If Required)**

**Presbytery Milwaukee**

Name of Applicant:

Home Address:

Home/Mobile Phone: Work Phone:

In the publicized Pulpit Supply List, please use my:

🞏 work phone number 🞏 home phone number 🞏 both phone numbers

🞏 I have been referred to the Commission on Ministry by:

🞏 I am making a self-referral

Ecclesiastical Status:

Date of Ordination:

Work Experience

|  |  |  |
| --- | --- | --- |
| Place of Work | Location (City, State) | Dates |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

References:

Please supply the names of two references, including an official from your denomination who can attest to your membership and standing:

|  |  |  |
| --- | --- | --- |
| Name of Reference | Location (City, State) | Phone |
|  |  |  |
|  |  |  |
|  |  |  |

Have you an existing relationship with a member congregation of the Presbytery of Milwaukee? If so, which one?

Please explain your reason for requesting to be enrolled on the Presbytery of Milwaukee's approved Pulpit Supply List:

Signature Date of Application

Please return this application, with the following items as appropriate:

🞏 a copy of your ecclesiastical resume

🞏 list service to the church as a ruling elder  
🞏 written statement of faith describing your views in theology, the Sacraments, and the government of the Church

to:

The Commission on Ministry

Presbytery of Milwaukee 6767 W. Greenfield Ave, Milwaukee, WI 53214

Or e-mail to: [agibbs@pbymilwaukee.org](mailto:agibbs@pbymilwaukee.org)

For Commission on Ministry Use Only:  
Date Application Received

Date Considered Eligibility Grid Status:

🞐 Ordained Presbyterian Clergy  
🞐 Ordained Clergy from a denomination in which we are in correspondence  
🞐 Qualified Lay person

Comments:

Date Approved / Disapproved