24 Month Non-Resident EPMC Supplemental Application

This is a Three Part Application:

- 1. The first section is to be filled out by the applicant.
- 2. The second section is to be filled out by the mentor.

APPLICANT INFORMATION (to be filled out by the applicant)

(Note: The applicant should consult with the Director of Candidacy, David Koll, regarding the selection of the mentor. Once the selection is agreed upon, the applicant asks the mentor to fill out this section of the application)

3. The third section of the report is filled out by the council (or council representative) for the church in which the applicant will be involved during the course of the 24 month non-resident EPMC. This church will most often be the church where the designated mentor serves, although on occasion circumstances may require an exception to this. Again, the applicant should consult with the Director of Candidacy if there is any question regarding which church council should offer endorsement for this program.

Last	First		Middle
Address:			
Street			
City	State/Province	Zip/Postal Code	Country
hone Number	Email		
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Current Ministry Position:
1. How long have you known each other as applicant and mentor and in what capacity?
2. What gifts for ministry do you see in the applicant, and how have you seen these gifts already begin to bear fruit for Christ and his Church?
3. Why do you feel this applicant would be a good candidate for the 24 Month Non-Resident EPMC?
4. Describe your level of commitment to this applicant, and this program, as you contemplate working in cooperation with both the local church and the regional classis team, so that he/she can successfully complete the program?
6. Who will be partnering with you in a designated Mentoring Committee (see Mentor Responsibilities, Form – the committee must be composed of at least the mentor, an elder, and one additional person) The elder: The additional person: Other additional person(s) (entional):
Other additional person(s) (optional): 7. Describe the nature of the ministry responsibilities and involvement that the applicant will experience as part of this "non-resident EPMC" placement (The rough guideline for the program is the equivalent of
5 hours a week/20 hours a month for a 24 month period. These hours may be part of employment at the

church or ministry, may be part of a field education course for seminary credit, or may be done purely on a volunteer basis. Questions regarding this matter should be referred to the Director of Candidacy)
CHURCH COUNCIL SECTION (To be filled out by a representative of the church council from the church where the applicant will be involved during the program.)
1. On what date did the church council review this 24 month Non-resident EPMC application?
2. Are there any concerns or particular needs of the church council or the applicant that should be expressed at this point? (If so, explain.)
 3. Does your council endorse the appointment and involvement of the mentor, and concur that he/she is ready to fulfill this role? □ Yes □ No Comments:
(Feel free to provide any additional comments on a separate sheet of paper and attach it to this form.)
Church Name
Address

City Country	State/Province		Zip/Postal Code	
Phone Number		Fax Number		
Email				
Name of person signing th	is form:			
Name		Title		
Signature:		D	ate	

After completing and signing this form, please send it to:

Christian Reformed Church in North America Candidacy Committee 1700 28th Street SE Grand Rapids, MI 49508

OR: Email to dkoll@crcna.org

(It is also recommended that a copy of this completed form be sent to the Classis CMLT)