

# INTERVIEW QUESTIONNAIRE

## LICENSED MINISTER

**Please note:** Given the time frame of the interview and the needs of the individual candidate, it may not be feasible to cover all the questions. It is recommended that spouses accompany the candidate for the questions on Calling, Personal Life, and Ministry. The committee and candidate should determine if the spouse should stay for the questions in the other categories.

Candidate's Name: \_\_\_\_\_

### Calling, Personal Life, Ministry

- |  |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|
| 1. To what extent has your calling into the ministry changed since you first received it?  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 2. How frequently did you preach over the past year? Is this more than the previous year?  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 3. Do you feel drawn to one type of ministry more than another? Are you attempting to develop variety in your preaching?   | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 4. Describe the last time that you led someone to the Lord. Describe the last time that you prayed with someone to receive the baptism in the Holy Spirit. Describe the last time that you prayed with someone to be healed. | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 5. Are you able to maintain a schedule for sermon preparation?   | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 6. Describe your devotional life.  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 7. Does the ministry create problems or tensions in your home? Are you endeavoring to maintain a devotional life with the family?  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 8. Are you having financial difficulties? If so, how are you dealing with them? If not, how would you deal with them?  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 9. Do you have a mentor—someone who serves as a model in ministry and to whom you look for counsel in regard to your spiritual development and your ministry?  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 10. Do you anticipate moving toward ordination? Why or why not is this your goal?  | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |
| 11. Do you have goals for further education?   | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <hr/>  |                               |                               |                               |

12. Are you building your library? Do you enjoy studying and developing sermons?  Good  Fair  Poor

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13. What do you enjoy most about the ministry? What is least enjoyable?  Good  Fair  Poor

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14. Do you experience the presence of Christ and live a holistic, healthy lifestyle that includes spiritual disciplines such as fasting, regular exercise, good diet, and rest?  Good  Fair  Poor

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15. Are there significant personal or family issues that we should be aware of as we consider your request for credentials?  Good  Fair  Poor

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### **General Council, District Council, Local Church**

1. As a licensed minister would you plan to attend District\* Council, Minister's Retreat, sectional meetings, and other district and sectional meetings?  Good  Fair  Poor

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2. What are the General Council and district support requirements? If applicable, have you been faithful in meeting your district support commitment as a certified minister?  Good  Fair  Poor

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3. What is the General Council position on divorce and remarriage? Are there any restrictions that apply to those who have a living former spouse in regard to church membership?  Good  Fair  Poor

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4. What resource would you use to find out how many churches, ministers, districts, or missionaries are in the General Council?  Good  Fair  Poor

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5. Why should a pastor be acquainted with parliamentary law? What is a good text?  Good  Fair  Poor

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6. What are the differences in district affiliated and General Council affiliated churches?  Good  Fair  Poor

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7. Who is eligible to vote at the district conference?  Good  Fair  Poor

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8. When might it be necessary or advisable to consult with your sectional presbyter? With the superintendent?  Good  Fair  Poor

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## Theology, Doctrine, Tenets of Faith

1. Give the meaning of the terms <i>repentance</i> , <i>regeneration</i> , <i>justification</i> .	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
2. What is the relationship of water baptism to salvation?	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
3. Explain the significance of the communion service.	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
4. What is your favorite Old Testament book and passage of Scripture? New Testament?	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
5. Describe the rapture of the church and indicate when it will take place.	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
6. When are present-day revelations and prophetic utterances of equal importance to the Bible?	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
7. Do you believe that everyone who is baptized in the Holy Spirit speaks in tongues at the time they are baptized in the Spirit? Explain your view.	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
8. Explain the difference in the function of speaking in tongues as a sign and as a gift.	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
9. Is there any New Testament basis for the giving of tithes and offerings to support the work of the church?	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
10. Explain the nature and purpose of the incarnation of Christ.	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
11. Is divine healing an essential element of one's salvation and ongoing relationship with Christ?	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
12. Are you struggling with any significant theological issues which we should be aware of as we consider your request for license?	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
13. Turn to Ephesians 4:11-13 and explain its meaning in your own words.	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

### SUMMARY BY INTERVIEWER:

In general, the candidate's responses were:  Very good  Satisfactory  Poor

Initials \_\_\_\_\_ Date \_\_\_\_\_

\*The term *district* is interchangeable with *network* throughout this form.