



REGISTRATION FOR THE PERIOD OF DISCERNMENT

An application to the Presbytery of South Australia through the congregation of _____ for participation in the Period of Discernment.			
PARTICIPANT INFORMATION			
Name <i>Surname</i> _____ <i>First</i> _____		<input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss <input type="checkbox"/> Ms. Gender Female <input type="checkbox"/> Male <input type="checkbox"/>
Address <i>Street:</i> _____ <i>City:</i> _____ <i>State:</i> _____ <i>Postcode:</i> _____		Phone (<i>Home/Work</i>) _____ Phone (<i>Mobile</i>) _____	
Occupation: _____		Email: _____	
Membership of the Uniting Church in Australia			
<input type="checkbox"/> Baptised member	<input type="checkbox"/> Confirmed member	<input type="checkbox"/> Member in Association	<input type="checkbox"/> Adherent <input type="checkbox"/> Other <i>specify</i> _____
Congregation where you regularly worship _____			
EDUCATIONAL BACKGROUND			
Institution	Year	Description of Award	
Is English your first language?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If English is not your first language give details of your English competency test scores if known			
Have you ever applied to be a Lay Pastor, Pastor, Deacon, Minister of the Word or Youth Worker in any church?			
<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, give details _____			
Have you participated in a Period of Discernment before?			
<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, give details _____			
Church roles in the last five (5) years			
Signature of applicant _____		Date _____	
TO BE COMPLETED BY THE MINISTER OR CHURCH COUNCIL CHAIRPERSON			
Name of applicant _____		is a (<i>select one</i>) <input type="checkbox"/> member <input type="checkbox"/> member in association <input type="checkbox"/> adherent	
in good standing within the _____		congregation.	
Signed			
Signature _____	Name _____	Position held _____	Date _____

Please write a brief statement below (100-200 words) outlining your reasons for applying to participate in the Period of Discernment. Also include a list of any theological study you have already done.

PRINT your completed registration form by hitting the PRINT tab at top right of page, sign and take to your minister or church council chairperson for their signed endorsement. Post your completed registration form to Annette Latham, the PoD Administrator at Uniting College or bring to your appointment with Craig Bailey, the PoD Coordinator at Uniting College, 34 Lipsett Terrace, Brooklyn Park SA 5032.

OFFICE USE ONLY	
Registration form and statement received	<i>Date</i>
Appointment with PoD Coordinator	<i>Date</i>
Name of Mentor	
Learning and serving plan received (signed by mentor)	<i>Date</i>
Commencement date for PoD	<i>Date</i>
Discernment Retreat attended	<i>Date</i>
Discernment Day attended	<i>Date</i>
2 nd contact by PoD Coordinator	<i>Date</i>
Ministries in the UCA topic completed	<i>Date</i>
Other topics	<i>Date</i>
Appointment with PoD Team	<i>Date</i>
PoD Completion Certificate issued	<i>Date</i>