



**North Indiana Emmaus Community**  
**EMMAUS MINISTRIES TEAM APPLICATION FORM**

(for Clergy only)

Please Complete this form and email it to Jerry Burghduff: [jburchduff858@gmail.com](mailto:jburchduff858@gmail.com) or Roy Nevill: [yorliven@gmail.com](mailto:yorliven@gmail.com)

**Applicant's Information**

Full Name: \_\_\_\_\_

Last

First

M.I.

Address: \_\_\_\_\_

Street Address

Apt/Unit #

City

State

Zip Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Motivation**

Why do you desire to be a Spiritual Director on an Emmaus Ministries team? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How do you see the Emmaus Ministries impacting the local church and the world? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Fourth Day Ministries experience**

What Emmaus Ministries retreat have you attended (Walk to Emmaus, Chrysalis, Face to Face, Journey to the Table)? Indicate event and year \_\_\_\_\_

\_\_\_\_\_

What other 4<sup>th</sup> Day ministry have you participated in (e.g. Kairos, Tres Dias, via de Cristo, Cursillo)? Indicate event and year. \_\_\_\_\_

\_\_\_\_\_

■ If you are selected to be an Emmaus Ministries Spiritual Director, will you:

- join the Community Board of Directors in living into its covenant with the Upper Room Ministries? \_\_\_\_\_
- work within the provided structure? e.g. use the provided outline to prepare your talk, follow time limits, preview the talk with the team and give the same talk on weekend?  
\_\_\_\_\_

■ "Serving in Emmaus Ministries is a privilege, not a right." What are your thoughts on this statement? \_\_\_\_\_

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■ Are you presently a member of a small / accountability group? \_\_\_\_\_

### Ordination/Licensing

■ High School: \_\_\_\_\_

Name

City

State

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? ( ) Yes No ( )

■ College/University: \_\_\_\_\_

Name

City

State

From: \_\_\_\_\_ To: \_\_\_\_\_ Degree: \_\_\_\_\_

■ Seminary/Divinity School : \_\_\_\_\_

Name

City

State

From: \_\_\_\_\_ To: \_\_\_\_\_ Degree: \_\_\_\_\_

■ Other: \_\_\_\_\_

Name

City

State

From: \_\_\_\_\_ To: \_\_\_\_\_ Degree: \_\_\_\_\_

■ Are you ordained/licensed in the process of being ordained/licensed? If in process, please explain and provide proof \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

■ When were you ordained/licensed? \_\_\_\_\_ Please provide proof of licensing/ordination

■ Ordaining/licensing body: \_\_\_\_\_  
Name

■ To what church/denomination/agency are you currently accountable?: \_\_\_\_\_  
\_\_\_\_\_

■ What is your role? Local Pastor, Elder ... \_\_\_\_\_

■ Does this church/denomination/agency authorize you for the service of Holy Communion?  
\_\_\_\_\_ Provide proof

■ In what context is the authorization valid? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Documents to be provided:**

- Proof of ordination/licensing
- Proof of authorization for the service of Holy Communion
- A statement of good standing from your denomination or overseeing authority

**Disclaimer and Signature**

I certify that my answers are true and complete to the best of my knowledge.

if this application leads to acceptance, I understand that false or misleading information in my application or interview may result in my release.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_