

CANDIDATE REGISTRATION FORM

Date _____

Name _____

Address _____

Home Phone _____

Work Phone _____

Email Address _____

Deadline for Report _____

Report to _____

Will you be attending Seminary? _____ **Where?** _____

Denomination

_____ ELCA	Synod _____
_____ Presbyterian	Presbytery _____
_____ Methodist	Conference _____
_____ UCC	Conf/Assoc _____
_____ Episcopal	Diocese _____
_____ Unitarian U.	
_____ Moravian	
_____ Reformed Church	
_____ Division of Global Missions	

Possible Assessment dates that fit your schedule:

You will need to complete three inventories (one online, remaining two either at our Center or with a “proctor”). It will take approximately two hours and will need to be completed at least one week before your scheduled evaluation.

At NCMDC _____ Date/Time _____

-or-

Proctor Name: _____

Address: _____
