



First Presbyterian Church
1001 NW 25th Street
Oklahoma City, Oklahoma 73106
www.fpcokc.org/stephen-ministry



Stephen Ministry Application

(Confidential)

Name _____

Address _____

City/State/Zip _____

Preferred Phone(s) _____

Email _____

We are excited you are considering becoming a Stephen Minister, and assisting us in this vital caring ministry!

Please review the FPCOKC Stephen Ministry website: www.fpcokc.org/stephen-ministry to orient yourself to our Stephen Ministry program. Also review the upcoming Class Schedule that is posted at the bottom of that page.

1. Briefly describe why you are interested in becoming a Stephen Minister.

2. Based on your current understanding of what it means to be a Stephen Minister, what do you think would be difficult or challenging aspects of this role for you?

3. Are you willing to commit to serve faithfully for a period of no less than two years? This includes: 1) the initial 50 hours of training; 2) regular visits to your care receiver (weekly or a mutually agreed-upon frequency); and 3) a monthly Small Group Peer Supervision.

Yes

No

4. I have read the Class Schedule as posted on the website, have prayed about the significant time commitment, and believe God is calling me to pursue this as a ministry.

Yes

No

What concerns do you have about the time commitment? What changes would you need to make in your life in order to fulfill this commitment?

5. Please provide three references who are not members of this congregation.

a. Name _____
Address _____
Relationship _____
Phone number _____

b. Name _____
Address _____
Relationship _____
Phone number _____

c. Name _____
Address _____
Relationship _____
Phone number _____

The information I have provided in this application is true and complete to the best of my knowledge. I give permission for the Stephen Leaders, if they deem necessary, to contact my references. I also understand that the Stephen Leaders will be processing applications, and I agree to participate in a follow-up interview with them. I may also be required to undergo a police background check.

Signature _____ Date _____

Thank you for completing this application! Please return completed form to Pastor Matt.