

## Church Profile Form



### Introduction

The Reformed Church in America's Office of Ministry Services provides information and services to ordained ministers who are seeking a call and churches who are seeking ordained ministers. It does not recommend any particular candidate or church but instead serves as a resource to both.

Though not all fields are required, please provide as much information as possible in order to give candidates an accurate understanding of the life of your church.

For further information, or if you have questions or problems while completing this form, please contact Ministry Services at [ministryservices@rca.org](mailto:ministryservices@rca.org) or 616-541-0895.

### Helpful Hints for this Form:

- ❖ To move to the next field, hit TAB.
- ❖ To move the cursor to a desired field, left click on it with the mouse.
- ❖ To mark (x) in a box, left click with mouse.
- ❖ Hitting ENTER will move the cursor to the next line but keep you in the same field (essay questions).
- ❖ Spell check is not available in this format.
- ❖ The form will "paginate" itself as you complete it.
- ❖ If at any time you cannot include information important to you because of the "form field," please continue to complete the question in the comment box on the last page. Make sure to reference the question number.
- ❖ Please sign and return the **Release Statement** at the end of this form. You may scan it and email it as an attachment to [ministryservices@rca.org](mailto:ministryservices@rca.org).

**Section A. Background Information**

Today's Date:     /     /

**Position to be filled:**

1.     **Name of church:**

2.     **Web address:**

3.     **Address:**

**Street**

**City / State / Zip Code**

**Telephone: (     )     -**

**E-Mail address:**

4.     **Classis:**

5.     **Classis Supervisor:**

**Address:**

**Street**

**City / State / Zip Code**

**Telephone: (     )     -**

**E-Mail address:**

6.     **Chair of search committee:**

**Address:**

**Street**

**City / State / Zip Code**

**Telephone: (     )     -**

**E-Mail address:**

7.     **Membership:**

<b>Time of worship</b>	<b>Five years ago</b>	<b>Today</b>
<b>Active Confessing Members</b>		
<b>Inactive Confessing Members</b>		

**Comment on significant changes:**

**Age of all active members (baptized and confessing)**

%	0-20 years old
%	20-34 years old
%	35-49 years old
%	50-64 years old
%	65 years and older

**8. Racial/Ethnic composition of congregation:**

%	African American
%	Asian
%	Caucasian
%	Hispanic
%	Other: (please specify)

**9. Worship schedule:**

**Average Attendance (includes adults and children)**

Time of worship	Average attendance Five years ago	Average attendance Today
am <input type="checkbox"/> pm <input type="checkbox"/>		
am <input type="checkbox"/> pm <input type="checkbox"/>		

**Comment on significant changes:**

10. Describe a typical worship service (order of worship, music, etc.) What is your congregation's preferred style or styles of worship? Attach a bulletin, if available.

11. Financial Information: Attach a copy most recent Consistorial Report and Annual Budget if available.

	Five Years Ago	Today
Total RCA related contributions	\$	\$
Total other contributions	\$	\$

Percentage of total budget contributed by living donors:

100-90 %	<input type="checkbox"/>
75-89 %	<input type="checkbox"/>
60-74 %	<input type="checkbox"/>
45-59 %	<input type="checkbox"/>
44 % or less	<input type="checkbox"/>

*(Please include a copy of your annual budget)*

12. **Congregational Giving:**  
**Number of those whose annual contribution is:**

<b>Less than \$500</b>	
<b>\$501- \$1,500</b>	
<b>\$1,501- \$2,500</b>	
<b>\$2,501-\$3,500</b>	
<b>Greater than \$3,500</b>	

13. **Financial assistance: Do you receive financial assistance beyond the congregation? (rents, etc.)** Yes  No

If yes, amount received last year: \$

List other fundraising programs that support the church:

**14. Church/Sunday School:  
Average Attendance**

Average attendance Five years ago	Average attendance Today

**Comment on significant changes:**

**15. Describe briefly all educational programs (including children, young adult, adult).**

16. **Church groups/organizations: Briefly describe ministry purpose of each group. (use separate sheet if necessary)**

Name of group	Frequency of Meeting (i.e. weekly, bi-monthly, etc)	Attendance

*(continued on attached page)*

17. **Comment on one event or experience over the last year that has significantly contributed to the spiritual life of the congregation.**

18. **Buildings: Please describe church-owned or rented buildings and purpose.**

19. Do you plan any capital expenditure during the next five years? Yes  No   
 If yes, please explain briefly:

20. Is there a mortgage indebtedness? Yes  No

Amount: \$

Of how long standing?

Annual rate of repayment

21. Pastor's study:

In church  in parsonage  Other  Not Provided

22. List all paid staff in addition to the pastor:

Position	
	Full time <input type="checkbox"/> Part time <input type="checkbox"/>
	Full time <input type="checkbox"/> Part time <input type="checkbox"/>
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	Full time <input type="checkbox"/> Part time <input type="checkbox"/>



**23. Consistory Membership: What method is used in selecting members?**

**Please list present Consistory members (Put a check in the box where appropriate)**

<b>Elder</b>	<b>Deacon</b>	<b>Male</b>	<b>Female</b>	<b>Occupation</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**24. What leadership roles do women currently fill in your church?**

25. In our congregation...(please check appropriate box)

	Few have...	Many have...	Most have...
Had up to twelve years of formal education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had some education beyond high school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A college degree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A graduate degree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26. In our congregation...(please check a box)

	Few are...	Many are...	Most are...
Scientists & Engineers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Farmers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business People	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students & Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial Workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office Workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. Special training/experience desired: (describe briefly).

28. Languages:

Should your pastor be fluent in any language other than English?

Yes  No  If yes, please explain.

29. The salary we are prepared to offer out new pastor is \$  
 The average annual increase to our pastor over the past three years was \$

30. Is a parsonage provided? Yes  No   
 If so, is it on site with the church? Yes  No   
 If the parsonage is not on site with the church, how far from the church is it located?

31. Is a Minister's housing allowance in lieu of a parsonage a negotiable option?  
 Yes  No

32. The benefits/business expenses we will provide our pastor are:  
 (Please check those provided or give amount as requested.)

Base Salary	\$
Housing Allowance	\$
Parsonage provided? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Travel Reimbursement	\$
Social Security (Amount)	\$
Book Allowance (Amount)	\$
Continuing Education Allowance (Amount)	\$
Provision for Sabbatical	\$
Other (Specify Below)	\$
<b>TOTAL</b>	<b>\$</b>

- Yes  No  Retirement
- Yes  No  Major Medical Insurance
- Yes  No  Health/Hospital Insurance
- Yes  No  Life Insurance
- Yes  No  Dental Insurance
- Yes  No  Unemployment Insurance
- Yes  No  Disability Insurance

Annual Vacation (Number of Weeks)

Necessary Comments regarding above:

**33. Community served: (please check one)**

<b>Rural: Under 2,500</b>	<input type="checkbox"/>
<b>Town: 2,500-9,999</b>	<input type="checkbox"/>
<b>Small City: 10,000-49,000</b>	<input type="checkbox"/>
<b>Metropolitan-Suburban: 50,000+</b>	<input type="checkbox"/>
<b>Metropolitan-Urban: 50,000+</b>	<input type="checkbox"/>
<b>Metropolitan-Inner City: 50,000+</b>	<input type="checkbox"/>
<b>Other:</b>	<input type="checkbox"/>

**34. Cooperative ministry: In what ways have you cooperated with other churches in your community during the past year?**

**35. Community involvement: In what community programs or projects have you participated during the past year? (As an organization, not as individuals.)**

**36. What denominations or religions are present within three miles (in rural areas, consider the county) where your church is located?**

**37. Outreach: What is your strategy to reach un-churched people in your community?**

**38. The income level of the people in our congregation tends to be: (please check one)**

<input type="checkbox"/>	<b>About average for our community</b>
<input type="checkbox"/>	<b>Somewhat below the rest of the community</b>
<input type="checkbox"/>	<b>Somewhat higher than the rest of the community</b>

**39. Describe the community and school system: (Provide website links where appropriate.)**

**40. Record of last three pastors:**

<b>Name</b>	<b>Dates</b>
	<b>to</b>
	<b>to</b>
	<b>to</b>

**41. Please complete your profile with the following contacts:**

<b>Name</b>	
	<b>Vice President, Consistory</b>
	<b>Classis Supervisor</b>



**3) Describe the strengths of your church, the best of what you are as a community, and what you can offer a new pastor.**

**4) Explain the strategies or ideas that most excite your church in becoming or remaining missional.**



**5) Name three of your church's most passionate hopes and why they are significant.**

**6) How do you hope someone who visits your church would describe what s/he considers to be most important?**

**7) Name at least one challenge facing your new pastor.**

**8) Describe your vision and hopes for your church and your pastor over the next 5 years.**

**9) Explain whatever else you would like your potential pastor to know about your church.**

**16. Church groups/organizations (Continued)**

- Celebrate Recovery, meets weekly, attendance of 6
- Life Beyond Codependency, meets weekly, attendance of 6
- Craft Ministry, meets 1x per month, attendance of 5
- Prayer Blanket Ministry, meets 1x per month, attendance of 5
- Women's Circle, meets 1x per month, attendance of 5

## Release Statement

(Full Church Name)

We, Bellevue Reformed Church, acknowledge that the information in this Church Profile is accurate and complete. We authorize the Office of Ministry Services (OMS) to release this profile to designated recipient(s) seeking positions as ordained Ministers of Word and Sacrament, including posting of this profile on the RCA website.

Lawrence W Brown

Signature of Search Team Chairperson or Designated

2-14-2022

Date