

Concordia University Chicago -- Director of Christian Education Program
Congregational Application for a Student Intern

Instructions: Use Adobe Reader 9.0 or higher. In order to save this form with the data you enter, type the name of your congregation in the correct field. Then go to File>Save As, and save the file in an easily remembered location on your local computer. As you complete this form, you will need to follow this same process. When asked if you want to overwrite the existing file, indicate "Y." Be sure to check if your form data is being saved.

Fill in all sections of this application (place an "NA" if not applicable). Enclose the Intern Financial Agreement Form, the Congregational Agreement Form, and your congregation's DCE Intern Job Description with this application.

Congregation: _____

Mailing Address: _____

Office Telephone: _____ District: _____

Staff: Pastor(s): _____

DCE/Deaconess/Parish Worker/etc: _____

Secretary: _____ Full-time or Part-time? _____

1. Reasons for seeking a DCE student intern:

2. Information about the congregation and community:

Year Organized _____ Baptized Members _____ Communicant Members _____

Average weekly worship attendance _____ Time of worship services _____

Demographic Overview of Congregational Age: 0-4: _____ 5-11: _____ 2-14: _____ 15-18: _____

19-25: _____ 26-35: _____ 36-45: _____ 46-55: _____ 56-65: _____ 66 +: _____

Important background relative to the historical development of the congregation:

Other items the university should consider:

A. Education Ministries: *(list potential and actual enrollment/involvement)*

	Potential	Actual		Potential	Actual
Sunday school	_____	_____	Midweek school	_____	_____
Confirmation	_____	_____	Youth Bible Classes	_____	_____
YA/Singles	_____	_____	Teacher training	_____	_____
Pre-school	_____	_____			

Adult Education opportunities: _____

Summer programs (i.e. VBS): _____

Other Christian Education Programs: _____

B. Please describe your present youth ministry efforts: *(frequency of activity, # of adult counselors, etc.)*

Number in: Grades 4-6: _____ Grades 7-8: _____ Grades 9-12: _____

Comments:

C. Other congregational activities worth noting:

D. Congregational Setting and Make-up:

Type of locale *(rural, suburban, urban, etc.)*: _____ Population: _____

Socioeconomic makeup of the congregation: _____

Major industries
or businesses:

Unique features
of the community:

E. Identify three dominant characteristics of congregation:

3. Outline of learning/service opportunities for the intern:

Administrative/
Office Procedures:

Evangelism:

Children/
Youth Education:

Retired Adults:

Adult Education:

Family Life:

Youth Ministry:

Young Adults/
Singles:

Music Activities:

Teaching:

Recruiting/Training:

Congregation
Organizations
(Circles, LWML, LLL, etc.):

Congregation Boards/
Committees:

Worship:

Visitation, Calls, etc.:

Stewardship/Congregation
Budgeting:

Social Ministry:

Community Activities:

Circuit/District Activities:

Small Group Activities:

Other Activities:

4. Information about Support and Supervision:

A. Person directly responsible for supervision: _____

B. Educational Experiences of Supervisor (*Formal and Continuing Education*):

College/Seminary/Workshop/Program:	Dates:	Degrees/Certificates:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. Previous Congregations Served by Supervisor (*most recent first*):

Congregation:	Dates:	Major Roles:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

D. Working with other staff (*please describe your philosophy and previous experience in working with other full-time professional staff*):

E. How many and what type of students have been supervised by this person previously?
(*vicars, DCE interns, student teachers, etc.*)

F. Is there an established Board of Parish Education? Yes No

G. Is there an established Board with whom the intern will work closely? Yes No

If yes, name of Board: _____

H. The intern should receive a minimum of one day off per week. What day would be most convenient?

I. What day will a weekly conference between supervisor and intern be held to discuss plans, activities, pertinent professional problems and personal issues?

5. Term of Internship:

Beginning:	June 1	June 15	July 1	July 15	Aug 1	Aug 15	Jan 1	Other: _____
<u>Preferred:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Acceptable:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Unacceptable:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Family Status of Prospective Intern:

A. Preference regarding the intern's family status?

	Single Male:	Married Male:	Married Male w/child(ren):	Single Female:	Married Female:	Married Female w/child(ren):
<u>Preferred:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Acceptable:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Unacceptable:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Intern Description: *(Please describe the type of intern you would ideally like to work with concentrating upon personality characteristics, ministry style, theological persuasion, and any other personal qualifications.)*

C. Expectations of Intern: *(Please outline below or on another page the major responsibilities of the intern. Please submit an intern job description on a separate sheet with this application.)*

D. Does the congregation desire, at its own expense, a visit by the intern for the orientation purposes only before the beginning of the internship? *(This is beyond the pre-internship orientation at the university.)* Yes No

E. Other matters that the university should be aware of?

F. Does the congregation have any plans at this time to call a full time certified DCE in the near future? Yes No

For the **Pastor:**

Printed Name	Signature	Date
Home Phone Number: _____	Cell Phone Number: _____	
Office Phone Number: _____	Email Address: _____	

For the **Congregation Officer:**

Printed Name	Signature	Date
Home Phone Number: _____	Cell Phone Number: _____	
Office Phone Number: _____	Email Address: _____	

After completing, mail forms to: Dr. Debbie Arfsten
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