



LEADERSHIP ADVANCEMENT PROCESS

of the NW District of LC-MS

23 W. Lost Lake Rd.

TONASKET WA 98855

509-485-2211

1-888-277-7597 pin 0513

Name _____

Address _____

No. & Street

City

State

Zip

Phone:

Home _____ Work _____ e-mail _____

Cell Phone _____ Birthdate _____ SS# _____

Marital Status _____ If married include name of spouse _____

Home church _____ Pastor _____

Number of years in current church _____ # of years membership as a Lutheran _____

Congregational positions Held:

Areas of Interest within congregation:

Religion classes in school setting -
Indicate if taught or taken

Institutes, seminars, Bible classes -
Indicate if taught or taken

Past Education

Name & address of Pastor/Mentor and one other reference.

Who or what stimulated your interest in service to the Lord as a Lay Assistant?

Please use a **separate piece of paper** to explain why you feel God is calling you to this training.

Signature _____ date _____

Please print form, complete and mail with **\$25.00 application fee** to LAP, 23 W Lost Lake Rd., Tonasket WA 98855.