

# EASTERN DISTRICT COMMISSIONED MINISTER INFORMATION FORM

Name \_\_\_\_\_

Church/School Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Position \_\_\_\_\_

Years in Current Position/Call \_\_\_\_\_

Education Experience \_\_\_\_\_

\_\_\_\_\_

Spouse \_\_\_\_\_

Children \_\_\_\_\_

\_\_\_\_\_

Hobbies \_\_\_\_\_

\_\_\_\_\_

Something people don't know about me is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OK to share on Facebook? YES \_\_\_\_\_ NO \_\_\_\_\_

*Please return completed form and a photo (if possible) to Ruth Marzano at  
[ruth.marzano@lcmsed.org](mailto:ruth.marzano@lcmsed.org) or mail to:*

*LCMS Eastern District  
ATTN: Ruth Marzano  
5111 Main Street  
Williamsville, NY 14221*