

AUCCIIM Member Data

[View Contact List](#) | [View Address Labels](#)



Preferred Contact Data

AUCCIIM ID

Prefix:	<input type="text"/>		
First Name	<input type="text"/>		
Middle Name	<input type="text"/>		
Last Name	<input type="text"/>		
Suffix	<input type="text"/>		
Preferred Phone	<input type="text"/>	Type of Phone	<input type="text"/>
Preferred Fax	<input type="text"/>		
Email	<input type="text"/>		<input type="button" value="Insert Picture"/>
Street Address	<input type="text"/>		<input type="button" value="Export Picture"/>
City	<input type="text"/>	State	<input type="text"/>
		ZIP	<input type="text"/>
Country	<input type="text"/>	Home Page	<input type="text"/>
Preferred Contact Method	<input type="text"/>	Opt into Email	<input type="text"/>
Year of Last Criminal Background Check yyyy	<input type="text"/>	Email Opt in Date	<input type="text"/>
Date of Last Change	<input type="text"/>	Opt into Published Directory	<input type="text"/>

Other Contact Information

Work Phone	<input type="text"/>	Home	<input type="text"/>	Cell Phone	<input type="text"/>
Work Email	<input type="text"/>				

Legal Stuff

(If different from Preferred)

Legal First Name	<input type="text"/>	Legal Middle Name	<input type="text"/>
Legal Last Name	<input type="text"/>	Legal Suffix	<input type="text"/>

AUCCIIM Member Data

Personal Information (Optional)

Spouse/Partner Name Spouse/Partner Birthday mm/dd
Your Birthday mm/dd

**Home Address
(if different from Preferred)**

Home Address Line 1
Home Address Line 2
Home City Home State/Province Home Postal Code
Home Country
Home Phone Home Fax
Home Pager Home Cell Phone
Home Email

**Permanent Contact information
(If Different From Home Above)**

Permanent Mailing Address
Perm City Perm State Cntry Perm Postal Code
Permanent Country
Perm Phone Perm Fax
Perm Pager Perm Cell Phone
Permanent Email
Home Page

IMN/AUCCIIM Information

AUCCIIM Member Data

IMN Training By

Year Trained IMN Designation

Paid IMN Member Years

Annual Meetings Attended

AUCCIIM

AUCCIIM Member Since Member level Basic or Sustaining

AUCCIIM Member Dues paid (Years)

Date AUCCIIM Dues Paid Date Invited into AUCCIIM

AUCCIIM Office Held AUCCIIM Term Expires

Currently Serving ...

Serving

Position Title

Position Dept.

Work Phone Work Cell Phone

Work Email Work Tollfree

Work Fax Work Home Page

Work Address Pager

Work City State Province Postal Code

Work Country

Are you Judicatory Staff? Placement Staff?

AUCCIIM Member Data

Ministerial Information

Association where Serving

Conference where Serving

Association where Standing is held

Conference where Standing is held

Contact Person in Judicatory where standing is held Judicatory Phone

Ordained by Denomination Date Ordained

Your Current Denomination if not UCC Dual Standing

Willing to Serve in DoC or FoA Church Dual Standing (Other Denomination Judicatory)

Home Congregation Name, City, State

**Your Availability/
Next Interim Assignment**

Date Available mm/dd/yyyy Are You Capable of serving in an Emergency Short Term/ Crisis Intervention Situation?

I would consider the following types of Assignment Other Availability Date

Sustaining Interim SI Part Time (PT) or Full Time (FT)

Transition Interim TI Part Time (PT) or Full Time (FT)

Consulting Interim CI Full Part Time

Mark the Regions you will consider serving

Northeast

Middle Atlantic

AUCCIIM Member Data

Southern

Great Lakes

West Central

Western

Willing to Relocate?

Only w arrangements for regular home visits?

Special Skills, Training, etc.

Special Training, e.g., Conflict Management, After Pastor, etc.

- | | |
|--|---|
| <input type="checkbox"/> After Pastor | <input type="checkbox"/> Mediation Training |
| <input type="checkbox"/> Appreciative Inquiry | <input type="checkbox"/> Multiple Staff |
| <input type="checkbox"/> Boundary Training | <input type="checkbox"/> Myers Briggs (MBTI Administration) |
| <input type="checkbox"/> Church Consultant & Facilitator | <input type="checkbox"/> Systems Theory |
| <input type="checkbox"/> Conflict Management | <input type="checkbox"/> Other... |
| <input type="checkbox"/> Executive Coaching | |

Language Skills
Enter the language, other than English in which you speak, read or write.

Special Skills (Experience)

Notes

**Places Served within
the last five years and
Highlights of each
assignment**

--