



GRACE CHRISTIAN EDUCATIONAL ASSOCIATION

BIOGRAPHICAL QUESTIONNAIRE

For nomination to the Grace Christian Educational Association Board

Name

Address

Age:

Birth date:

Married: ___Yes ___No

Phone Number:

Children:

Names:

Grades in School:

Do they attend Grace Christian School?

___Yes ___No

Conversion experience:

Education:

Work experience:

Occupation:

Church affiliation:

Member? ___Yes ___No

Previous church positions:

