Church of Our Lord Jesus Christ of the Apostolic Faith, Inc. OFFICE OF THE EXECUTIVE SECRETARY Post Office Box 590388 – Houston, Texas 77259-0388 (713) 545-8793 – FAX (713)-649-0309

e-mail: execsectofc@aol.com

## **APPLICATION FOR CREDENTIAL**

Application for:				
cial Missionary nior Missionary	Deacon Exhorter	Licentiate Elder	District Elder Bishop	Apostle Exchange
Name (Mr., Mrs., 1	Miss)			
<b>,</b> , , , , ,	Last	First		Middle
			Telephone	Zip Code
	Female Age			Zip Code Day Year
Diocese			Bishop	
		)	-	the Holy Ghost (Acts 2:4)State
Spouse's Name		ed Separated I	Wife's Maiden Na	me
Were you married	before you married you	ur present spouse? Yes	No	
Has your spouse b	een married before? Ye			
f Yes, how was th	eir marriage terminated	1? Death Divorce	Other* (*ez	xplain on reverse side)
State church conne	ections after being save	d (Spiritual birth [Acts 2:4	1] and give reason for le	aving)
	0		- 0	
2				
• •		ch?		
				scipline Book? Yes No ther organization? Yes No
f ordained, date o	f ordination		By whom ordain	ed?
Schools Attended?	PElementary	High	n School	College
Bible School		Seminary		Other
What is your callir	202			
Evangelist		Teacher Deacon	Global Missi	on Home Mission
Name of your Past	or			
	Street)			_(P.O. BOX)
City		State	<u></u>	Zip Code
Current Status (Cr	edentials you now hold	): How many years?	_ If none, check here	2
Senior Missionary	Social Missionary Ex	khorter Local Licenti	iate Ordained Deacon	Elder Bishop
		If Yes, give name and		
Name Address		Ci	_ lelephone	State Zip Code
		CI		
Signature of recon	mending Pastor			Date
-		s Pastor must recommend		
Have you ever bee	n accused or convicted	of sexual misconduct? V	es (Explain on bac	k of application) No
•			· •	idelines? Yes No
•		ted and submitted to the E		
(Request backg	round check on-line v	ia the following link: htt	ps://www.ministryopp	portunities.org/churchOLJC)
				s Document? Yes No
Have you read, un	derstand, and agree to a	abide by the COOLJC Ma	rriage Policy? Yes	_ No
	DO NOT W	RITE BELOW THIS LIN	JE FOR EXAMINER'S	S USE ONLY
Application Fee Pa		_ Amount \$		
		_ / infount		
		Type of Crea	lential Issued	
Social Missionary	Deacon	Licentiate	District Elder	Apostle
Social Missionary Senior Missionary	Exhorter	Elder	Bishop	Exchange
Date Issued		Date Entered	in data base	
Form Revised 03	/2015			