

## **APPLICATION FORM INSTRUCTIONS**

Please read all instructions carefully before filling out this application

This application is in four sections: (total of eleven pages)

Section 1:	Credential application	(Page 2)	(to be filled out by the applicant)
Section 2:	Data Release form	(Page 7)	(to be filled out by the applicant)
Section 3:	Applicants reference form	(Page 8)	(to be filled out by an ordained minister)
Section 4:	Applicants spouse reference form	(Page 11)	(to be filled out by the applicants Pastor)

### APPLICANT:

- 1. Complete Section 1 and Section 2 first, and then submit the application to your Pastor to complete the reference forms of Section 3 and Section 4. Provide your Pastor with the appropriate postage and *have him send the completed application* to the District Secretary's office.
- 3. If applying for Ordination, include an additional check in the amount of \$25.00, payable to F.O.C.U.S., I.F.C.A.
- 4. If transferring from another denomination, be sure to enclose copies of your Ordination certificate or other levels of recognition. A copy of your letter requesting transfer or resignation should also be included.
- 5. <u>Print or type</u> all answers.
- 6. All questions must be answered, including Ministerial Viewpoints.

Please note: all applicants will be called for a personal interview and/or orientation.

Do not separate this form!

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# **CREDENTIAL APPLICATION FORM**

	International Fe	ellowship of Christian	Assemblies	
		Di	strict	
	s( ) Ordination ( ) Minister of ) Re-Instatement ( ) Transfe		d Preacher () Christi	ian Worker
	Please use separate she	et of paper for any add	itional information	
PART 1 PERSONAL	NFORMATION			
1. Name				
				Code
3. Phone Numbers: Ho	ome ( )	Office ( )	Fax	( )
4. Date of Birth	Birth Place		Social Security N	Jo
Are you a citizen of the	he United States?	If not, what count	ry?	
	*Separated? se explain			
b. *If divorced, pleas	se explain			
	ou divorced?//			
_	former spouse(s) if deemed			
6. List names of all chil	ldren:	Name:		Age:
Name:	Age:	Name:		Age:
Name:	Age:	Name:		Age:

#### PART 3 -- EDUCATION AND CHRISTIAN EXPERIENCE

- 7. What is the highest grade of elementary or high school completed? \_\_\_\_\_\_ Where?
- Attach a list of Colleges, Bible School or seminaries that you have attended.
   Give dates, courses completed, and degrees earned.
   Include list of any academic awards, special honors, etc., that you have received.
   Would you be willing to advance your education in accordance with IFCA recommendation?
- Give a brief outline of your past and current experience in church leadership. Include any church offices held, length of time in office, evangelistic services conducted, churches served as pastor. Include dates and any other important information.

10. When were you born-again?	Where?	

Can you provide confirmation from a Pastor or church?

11. a) Have you been baptized in water by immersion? \_\_\_\_\_ When and where? \_\_\_\_\_

 12. Where is your church membership?

 Prior?

- 13. Were you previously credentialed with the International Fellowship of Christian Assemblies or any other organization? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_ Where? \_\_\_\_\_
- 14. Have you ever been dismissed from a Denomination or church for cause or withdrawn under charges? If yes, give details \_\_\_\_\_\_
- 15. If you have transferred, provide name, address, and telephone number of your superior as well as Denomination.
- 16. May we have your permission to contact your previous denomination? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please give reason(s) \_\_\_\_\_\_
- 17. Do you read the Bible regularly? \_\_\_\_\_ Have you read the Bible completely through at least one time? \_\_\_\_\_

#### PART FOUR - RELATIONS WITH THE INTERNATIONAL FELLOWSHIP OF CHRISTIAN ASSEMBLIES

- 18. Have you read the Constitution and By-Laws of the International Fellowship of Christian Assemblies? \_\_\_\_\_\_\_ Are you in agreement with them? \_\_\_\_\_\_ If not, list area(s) of disagreement \_\_\_\_\_\_\_
- 20. Do you fully agree with the doctrinal positions of the International Fellowship of Christian Assemblies, and do you agree to teach and preach in harmony with them?
  - Do you hold any mental reservations about the Articles of Faith of the International Fellowship of Christian Assemblies? If yes, give an explanation
- 21. If you reach a place where you are out of harmony with the doctrines and standards of the International Fellowship of Christian Assemblies, will you surrender your credentials & certificates to your District Officials?
- 22. Will you cooperate with your District and National Officials?
- 23. Will you abide by the decisions of the General Council? \_\_\_\_\_ The District Council? \_\_\_\_\_

#### PART 5 -- FINANCIAL AND EMPLOYMENT INFORMATION

- 24. Have you faithfully supported your local church with your attendance, tithes and offerings?
- 25. Have you received a copy of the financial giving plan for credential holders of the IFCA?
- 26. Will you faithfully support the General Council and District Council through this plan? \_\_\_\_\_\_ Do you know that if you do not contribute financially your credentials will not be issued to you? \_\_\_\_\_\_
- 27. Have you ever declared bankruptcy?
   Been sued for collection of a debt?

   Had wages attached?
   Has any property been repossessed for non-payment of contract or bills?

   Have you been involved in any legal action?
   If any answer is yes, please explain on separate paper.
- 28. Are you currently having financial difficulties? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_
- 29. If you are or have been employed in secular work, please attach a list of employers to this application, including addresses, supervisors, and dates you were employed in the respective job.

#### PART 6 -- PERSONAL LIFE

30	0. Have you ever been charged y	with a moral offense?	•	If answer	is yes,	please	provide al	l necessary
	information under separate cove	er.						

31. Have you ever been tested HIV positive? \_\_\_\_\_ If yes, please give details. \_\_\_\_\_

32. Do you presently have,	or indulge	in, any of the followin	g habits?		
Watch pornography?	Yes	No	Drink alcohol?	Yes	_ No
Live a gay lifestyle?	Yes	No	Use illegal drugs?	Yes	_ No
Practice adultery?	Yes	No	Smoke or chew tobacco?	Yes	_ No
33. Summarize your study h	abits, praye	er time and devotional	life:		······
34. Have you received a defi	nite call fr	om God?	_ To what?		
<ul><li>34. Have you received a defi</li><li>35. Do you remember when</li></ul>					

36. Why are you interested in holding credentials with the IFCA?

#### PART 7 -- MINISTERIAL VIEWPOINTS

On separate paper, write brief essays explaining your concept of, and/or understanding of the following subjects: (give Scripture references)

- 37. The man/woman of God.
- 38. The "ministry".
- 39. Divorce and remarriage.
- 40. Discipleship/submission.
- 41. Tithing.
- 42. Faith and Prosperity teaching.
- 43. Divine healing, water baptism, baptism of the Holy Spirit.
- 44. The Minister's covering.
- 45. The Minister's accountability.

- 46. The need for affiliation.
- 47. The manner of, or procedure for, church marriage.
- 48. The Minister's response to encountered resistance from: church board, individuals, etc.
- 49. Abortion, homosexuality, AIDS.

I grant the International Fellowship of Christian Assemblies permission to conduct an investigation into the information given in this application and to circulate said application and information to whomever necessary.

Signed: \_\_\_\_\_ Applicant

#### CANDIDATE:

I certify that I have read all the questions in this application and that I have answered them truthfully. I hereby apply for credentials with the International Fellowship of Christian Assemblies, through the Niagara Mohawk District. I agree to be interviewed in person before my recognition is granted.

I am aware that if any of my answers are discovered to be false, my credentials will be automatically revoked.

I hereby set my signature this day of 20

<u>PASTOR</u>: Please evaluate this application, complete the recommendation, sign it and return it to:

	International Fello	owshi	p of (	Christian Asse District	mblies			
	Address	City			eZip			
Ι	, Pastor of							,
recommend		to	the	International	Fellowship	o of	Christian	Assemblies
(	District), to be considered favorably fo	r crec	lentia	ls. He/she has	been faithf	ul to	the local ch	urch and has
demonstrated	leadership qualities and other evidences	of a d	esire	to be used of G	od.			

Pastor's Remarks:

Date

Pastor's Signature

DISTRICT ACTION
Approved Recognition granted as:
lot approved Reason:
lold For
Date District Officer

### DATA RELEASE FORM

### INSTRUCTIONS This form must be filled out by the applicant

Date

Applicant's Signature

### **REFERENCE FORM FOR A CREDENTIAL APPLICANT**

Anı	plicant's Name:		
	nister's Name:		
Add	ldress:		lelephone: ( )
City	ty:	State:	Zip:
Chu	urch Name:	Your Positio	n:
If y	you are not an IFCA Pastor, with whom do you	hold credentials?	
1.	Are you the applicant's Pastor?	If not, what is your associ	ation with the applicant?
2.	How long have you known the applicant?	In what capaci	ty?
3.	Are you in any way related to the applicant?		
4.	To the best of your knowledge		
	a. Is the applicant living a consistent Christi	ian life?	
	b. Has the applicant continued to grow tow credential?	ards spiritual maturity and read	ched a level suitable for his/her requested
	c. Is the applicant received well by the com	munity?	_
	d. Is he/she respected and received well by t	the local church which he/she a	ttends or pastors?
	e. Is he/she respected and received well by o	colleagues in the community? _	

5. So that we may be better acquainted with the traits that best describe the applicant, please circle the proper number after the statement which applies. The range of numbers is "1" (poor) and number "5" (excellent).

Courtesy	1	2	3	4	5	no information
Maturity	1	2	3	4	5	no information
Leadership	1	2	3	4	5	no information
Initiative	1	2	3	4	5	no information
Adaptability	1	2	3	4	5	no information
Dependability	1	2	3	4	5	no information
Bible Knowledge	1	2	3	4	5	no information
Ministry Involvement	1	2	3	4	5	no information
Physical Fitness	1	2	3	4	5	no information
Wise use of free time	1	2	3	4	5	no information
Neatness of person	1	2	3	4	5	no information
Care of property	1	2	3	4	5	no information
Respect for property	1	2	3	4	5	no information
Wisdom in use of money	1	2	3	4	5	no information
Consideration of others	1	2	3	4	5	no information
Interpersonal relationships	1	2	3	4	5	no information
Public speaking ability	1	2	3	4	5	no information
Behavior in public	1	2	3	4	5	no information
Behavior with the opposite sex	1	2	3	4	5	no information
Overall decorum	1	2	3	4	5	no information
Relationship with family	1	2	3	4	5	no information
Cooperation with family	1	2	3	4	5	no information
Disposition	1	2	3	4	5	no information
General attitude towards the Ministry	1	2	3	4	5	no information
Devotional and study habits	1	2	3	4	5	no information

	Sincerity	1	2	3	4	5	no information
	Discipline in the home	1	2	3	4	5	no information
6.	What type of ministries, gifts an	d talents are evide	ent in th	ne applica	ant's life	?	
7.	Is there any evidence of God's c	all to the ministry	on the	applican	t?		
	Yes Possibly	No		Pleas	se comm	nent on your	answer:
8.	What characteristics of this perso	on do you feel mig	ght con	tribute to	) a succe	essful Minist	ry/Christian service?
9.	What characteristics of this perso	on do you feel mig	ght crea	ate probl	ems in th	ne Ministry/	Christian service?
10.	How does the applicant react to	instruction, couns	el, disc	ipline, or	r correcti	ion?	
11.	What opinion have you formed a	regarding his/her (	Christia	an charac	ter?		
12.	To the best of your knowledge, International Fellowship of Chri			-			
13.	List any habits or areas of integr their Ministry or Christian servio				2		*
14.	Can this applicant be trusted to k	keep confidence?	Not	usually		Usually	Always

15. <u>Circle the words which you feel would best describe the applicant:</u>

Impatient	Prejudice	Impulsive	Socially Awkward	
Intolerant	Tactful	Studious	Self-Confident	
Insecure	Argumentative	Organized	Sarcastic	
Modest	Domineering	Loving	Critical of others	
Patient	Proud	Kind	Mature	
Anxious	Timid	Loyal	Compassionate	
Nervous	Verbal	Gentle	Teachable	
Depressed	Humble	Intelligent	Self-disciplined	
-	the applicant named for credent ments?		With reservationNo	

Date

Signature

#### **REFERENCE FORM FOR A CREDENTIAL APPLICANT'S SPOUSE**

INSTRUCTIONS	
This form must be completed by the applicant's Pastor	•

Name of Applicant's Spouse

1.	Are	e you an Ordained Minister?					
2.	In your opinion, does he/she display a cooperative spirit concerning the spouse's call to the ministry?						
3.	Do	bes he/she become involved in the church by:					
	a.	Attending services:	Regularly	Occasionally	Never		
	b.	Participating in worship:	Regularly	Occasionally	Never		
	c.	Serving in ministries:	Regularly	Occasionally	Never		
4.	To the best of your knowledge						
	a.	. Is the spouse living a consistent Christian life?					
	b.	. Has he/she continued to grow towards spiritual maturity?					
c. What characteristics of this person do you feel might cause problems in the ministry of his/her spous					istry of his/her spouse?		
	d. Is the spouse respected well by the local congregation? In the community?						

If you answered "no" to any of the above questions, please explain:

### Circle the words which you feel would best describe the applicant's spouse:

Impatient	Prejudice	Impulsive	Socially Awkward
Intolerant	Tactful	Studious	Self-Confident
Insecure	Argumentative	Organized	Sarcastic
Modest	Domineering	Loving	Critical of others
Patient	Proud	Kind	Mature
Anxious	Timid	Loyal	Compassionate
Nervous	Verbal	Gentle	Teachable
Depressed	Humble	Intelligent	Self-disciplined

Date

Signature