

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

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APPLICATION FOR CREDENTIAL

Application for:

Social Missionary	___
Senior Missionary	___

Deacon	___
Exhorter	___

Licentiate	___
Elder	___

District Elder	___
Bishop	___

Apostle	___
Exchange	___

Name (Mr., Mrs., Miss) _____ Email Address _____

Address _____ Telephone _____
Last First Middle

City _____ State _____ Zip Code _____

Male ___ Female ___ Age ___ Date of Birth: Month ___ Day ___ Year ___

Diocese _____ Bishop _____

Date Baptized in Jesus' Name (Acts 2:28) _____ Date Baptized with the Holy Ghost (Acts 2:4) _____

Where Baptized? Church _____ City _____ State _____

Marital Status: Single ___ Married ___ Separated ___ Divorced ___

Spouse's Name _____ Wife's Maiden Name _____

Were you married before you married your present spouse? Yes ___ No ___

If Yes, how was the marriage terminated? Death ___ Divorce ___ Other* ___ (*explain on reverse side)

Has your spouse been married before? Yes ___ No ___

If Yes, how was their marriage terminated? Death ___ Divorce ___ Other* ___ (*explain on reverse side)

State church connections after being saved (Spiritual birth [Acts 2:4] and give reason for leaving).

1. _____

2. _____

Why do you desire to unite with this church? _____

Do you subscribe to the doctrine, rules, and regulations of this church as set forth in the Discipline Book? Yes ___ No ___

Do you believe in and pay tithes? Yes ___ No ___ Are you a new applicant from another organization? Yes ___ No ___

If Yes, name the organization _____

If ordained, date of ordination _____ By whom ordained? _____

Schools Attended: Elementary _____ High School _____ College _____

Bible School _____ Seminary _____ Other _____

What is your calling?

Evangelist	___
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Pastor	___
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Teacher	___
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Deacon	___
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Global Mission	___
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Home Mission	___
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Name of your Pastor _____ Church Website _____

Pastor's Address (Street) _____ (P.O. BOX) _____

City _____ State _____ Zip Code _____

Current Status (Credentials you now hold): How many years? ___ If none, check here ___

Senior Missionary	___
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Social Missionary	___
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Exhorter	___
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Local Licentiate	___
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Ordained Deacon	___
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Elder	___
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Bishop	___
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Are you now pastoring? Yes ___ No ___ Give name of church you are pastoring or church you are now attending:

Name _____ Telephone _____

Address _____ City _____ State _____ Zip Code _____

Signature of Applicant _____ Date _____

Signature of recommending Pastor _____ Date _____

(Applicant's Pastor must recommend and sign, except in unusual situations)

Please initial you response to the five following questions:

Have you ever been accused or convicted of sexual misconduct? Yes ___ No ___

Have you read, understand, signed, and agree to abide by the COOLJC Sexual Conduct Guidelines? Yes ___ No ___

Has your background check been completed and submitted to the Executive Secretary's Office? Yes ___ No ___

Applicant must complete background check on-line via the following link <https://www.ministryopportunities.org/churchOLJC>

Have you read, understand, and signed the COOLJC Covenant of Ministerial Sexual Ethics Document? Yes ___ No ___

Have you read, understand, and agree to abide by the COOLJC Marriage Policy? Yes ___ No ___

DO NOT WRITE BELOW THIS LINE. FOR EXAMINER'S USE ONLY

Application Fee Paid: Yes ___ No ___ Amount \$ _____ Foreign: Yes ___ No ___

If rejected, give reason(s) _____

Application examined by: _____ Date: _____

Date Issued _____

Date Entered in data base _____

Type of Credential Issued

Social Missionary	___
Senior Missionary	___

Deacon	___
Exhorter	___

Licentiate	___
Elder	___

District Elder	___
Bishop	___

Apostle	___
Exchange	___