

FULL GOSPEL

CHURCHES INTERNATIONAL

GENERAL SUPERINTENDENT
REV. TRAVIS WATKINS
2525 ADAMS, GRANITE CITY, IL
(618) 975-4713

GENERAL SECRETARY/TREASURER
REV. AMY PATRICK
2101 E 34TH PL. JOPLIN, MO 64804
(417) 850-1254

ASSISTANT GENERAL SUPERINTENDENT
REV. WILLIAM ALLEN
PO BOX 1105 PARAGOULD, AR 72451
(870) 335-0438

MINISTERIAL APPLICATION

(TYPE OR PRINT ONLY)

DATE / /

If you are applying for the first level of ministry as an exhorter, or transferring from another organization at the licensed or ordained level, it is good to review a few of the scriptures that, if followed, will keep a ministry stable and successful. A few of the scriptures are: Matthew 10:10, Romans 15:1, 16, 17; I Corinthians 1:2; II Corinthians 13:11; Ephesians 4:31, 32, 5:1, 12; Philippians 1:27, 2:13; I Thessalonians 5:12, 15; I Timothy 3:1, 16, 4:12; II Timothy 2:23, 26, 3:10, 17; Titus 1:5, 9, 2:7, 8, 3:9; Hebrews 13:5, 7, 17; James 1:5, 3:13, 17; I Peter 5:1, 10.

Full Name _____ Social Security Number _____

Address _____ City _____ State _____ Zip _____
Phone _____ Birth Date _____ Nationality _____
E-Mail _____ Where Born? _____

Sex M or F Marriage Status. M S Div. If Divorced State Reason _____
Spouses name _____ Date of Marriage _____

Have you Been Remarried? _____ Do you use Tobacco, Narcotics, or Liquor? _____
Church you attend _____ Do you attend Faithfully? _____

Pastor's Name & Telephone Number _____

Your Present Ministerial Activities _____

When and where were you saved? _____

Have you received the Holy Ghost according to Acts 2:4? _____ Have you ever filed bankruptcy? _____
Credentials desired: Ord. _____ Lic. _____ Exh. _____ CW _____ Credentials previously held: Ord. _____ Lic. _____ Exh. _____ CW _____

Do you carry credentials with another organization? If yes, give name, address and telephone of organization: _____

By joining FGCI you will be subscribed to our monthly newsletter, The Echoes. Would you like The Echoes sent via mail or email? _____

Do you plan to withdraw membership from this organization, if accepted? _____
Have you ever had your credentials revoked? If yes, give reason _____

Will you teach and practice water baptism according to Matthew 28:19? _____

Years as Pastor _____ Evangelist _____ Teacher _____ Other _____

A \$25 Convention fee is required to help fund our National Convention. Do you agree to pay this fee? _____

Education and Training

Highest education or lack of education doesn't negate your genuine call of God to the ministry. This is for reference only.

Last grade attended: (one through 12) _____ Years of College _____ List Colleges(s) attended and Degrees earned _____

Please enclose a copy of certificate of degree

Are you presently employed in secular work? _____

What type of secular work have you followed? _____

Please remit a one time \$150 registration fee with your application. (It will be refunded if credentials are not issued.)

Annual renewal fees are accepted during March of each year and are due no later than April 15th.

A registration fee must accompany each application, including applications for promotion from one level of ministry to another.

When an application is submitted with a registration fee January 1st or after, the applicant will not be subject to the renewal fee until the following year.

Personal Commitment

I agree with and fully abide by Code of Ethics, Doctrine and By-laws of FGCI. I reaffirm my vow to fully abide by the Doctrine, Constitution and Bylaws and the Ministerial Code of Ethics of Full Gospel Churches International. Regarding ministerial tithes, I will give a minimum of 2% of my ministerial income to support the Fellowship which is required.

I affirm that the information I have given is correct to the best of my knowledge.

\$150+ \$25 Convention Fee paid

Signed

Recommending Minister's Signature, Address and Telephone Number

Pastor's

Signature _____ tele _____

1. Name _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

2. Name _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

Official Use Only

Application considered on _____ / _____ / _____

Accepted _____ Rejected _____

State Superintendent or Credentials Board Chairman

General Secretary/Treasurer