

# 2024 MINISTERIAL APPLICATION

APOSTOLIC ASSEMBLY OF THE FAITH IN CHRIST JESUS

5401 Citrus Ave. Fontana, CA 92336



**IMPORTANT NOTE: If this application is received after September 1, 2023, there will be a late fee of \$25.**

## APPLICANT SECTION

**INSTRUCTIONS:** Please fill out this application CAREFULLY and COMPLETELY. Type or print LEGIBLY. Do not leave any blanks. Answer all questions that apply to you or write NA.

Name: \_\_\_\_\_  
Last Name Middle Name First Name

Wife's Name: \_\_\_\_\_ Credential # \_\_\_\_\_

Marital Status: Single  Married  Widower:  Did you apply last year? (2023) Yes  No

Home Address: \_\_\_\_\_

Mailing Address - (if Different): \_\_\_\_\_  
Street Number City State Zip Code

Email Address: \_\_\_\_\_  
P.O. Box City State Zip Code

Home Phone: ( ) Cell: ( ) Church: ( )

Do you agree with the teaching and practice of the Apostolic Doctrine? Yes  No

Do you agree with and practice the organizational system established by our Constitution? Yes  No

Do you agree with and practice the economic system established by our Constitution? Yes  No

Are you faithful in the biblical mandate of giving your tithes? Yes  No

Have you completed the sexual harassment prevention training? Yes  No

Have you completed the child abuse prevention training? Yes  No

Have you submitted a background check? \*For those changing ministerial category Yes  No

**\*Each training must be completed on a yearly basis, please attach the completion certificate with this application.**

If you answered NO to any of the previous seven questions, explain:

By signing this form you are acknowledging that as a minister of the Apostolic Assembly you are a Mandatory Reporter and, as such, you are legally obligated to report any case of abuse or neglect of a minor to the civil authorities and the church. Furthermore, you will not use your credential, license, or certificate to embroil the Apostolic Assembly in private business.

Applicant's Signature: \_\_\_\_\_ Date: / /  
MM DD YY

## PASTORAL & EPISCOPAL SECTION

This application is in the ministerial category of: (Please mark the corresponding category)

**\$250 Pastoral Credential \***

**\$150 Credential\***

**\$130 License\***

**\$70 Certificate**

Pastor

Co-Pastor

Minister

Initiated Deacon

Pastor in Charge

Assistant Pastor

National Missionary

Minister in Charge

National Evangelist

### COURTESY OPTION FOR DISTRICT BISHOP ONLY

#### Courtesy

Emeritus\*

\*65 years old, 20+ years as pastor in the Apostolic Assembly, and General Board approved

Retired Pastor\*

**\* \$50 increase only for 3 years (2023-2025)**

Bishop's Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: / /  
MM DD YY

Pastor's Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: / /  
MM DD YY

Church Address: \_\_\_\_\_

Church Mailing Address: (if different) \_\_\_\_\_

## FOR OFFICE USE

Payment: \_\_\_\_\_ Processed By: \_\_\_\_\_ Date Processed: \_\_\_\_\_