



MINISTERIAL APPLICATION

The International Pentecostal Holiness Church, Inc.

OUR MISSION:

To multiply and mature believers and churches, discipling them in worship, fellowship and evangelism as we obey the Great Commission in Cooperation with the whole Body of Christ.

This form is to be completed by all candidates applying for ministerial credentials for the first time. It is to be returned to the conference office. All questions must be answered clearly and fully. PRINT WITH BLACK INK OR USE A TYPEWRITER. If sufficient room is not found on the form for a proper answer to any question, state your answer on a separate sheet of paper.

PACIFIC WESTERN NETWORK MINISTRIES

APPLICATION FOR:

- | | |
|---|--|
| <input type="checkbox"/> Local Church Minister's Certificate | <input type="checkbox"/> Certificate of Ordination |
| <input type="checkbox"/> Minister of Church Education License | <input type="checkbox"/> Transfer |
| <input type="checkbox"/> Minister of Music License | <input type="checkbox"/> Reinstatement |
| <input type="checkbox"/> Minister's License | |

Attach
a recent
photograph
of yourself
here.

APPLICANT:

1. Full Name _____
2. Address _____
City _____ State _____ Zip _____
3. Phone - Home _____ Office _____ Cell: _____ E-Mail: _____
4. Social Security Number _____ - _____ - _____
5. Date of Birth _____ 6. Place of Birth _____ 7. Nationality _____
8. Sex: ☐ Male ☐ Female
9. Marital Status: ☐ Single ☐ Married ☐ Divorced* ☐ Widow/er
10. Spouse's Full Name _____
11. Spouse's Date of Birth ____/____/____
12. Have you or your spouse been previously married? ☐ Yes ☐ No
13. If yes, how was the marriage(s) terminated? ☐ Divorce ☐ Widowed ☐ Annulment
*Please include a copy of the divorce decree and give details of divorce along with circumstances; use separate sheet of paper.
14. Children's Names and Ages: _____

15. Give three references. Include (1) *pastor; (2) businessman; and, (3) one other person not related.
*A reference letter from the pastor (signed by the pastor and the church secretary) should accompany this application.

NAME	ADDRESS	CITY/STATE/ZIP	PHONE
(1) _____	_____	_____	_____
(2) _____	_____	_____	_____
(3) _____	_____	_____	_____
16. Present Occupation: _____
17. Have you ever been convicted of a felony or misdemeanor (excluding minor traffic offenses)?
☐ Yes ☐ No If yes, explain _____
18. Do you agree to furnish us with a criminal/credit background check? ☐ Yes ☐ No
19. Are you a member of any secret society such as the Masonic Lodge or the Scottish Rite? ☐ Yes ☐ No

EDUCATION:

EDUCATION	Name and Location of School	No. of Years Attended	Date Completed	Degree Earned
HIGH SCHOOL				
COLLEGE				
GRADUATE/ SEMINARY				

Have you completed the International Pentecostal Holiness Church's (IPHC) ministerial training course?

☐ First Year ☐ Second Year ☐ Third Year ☐ Equivalent training

(Give details) _____

Will you take advantage of the opportunities made available for training, instruction, information, and inspiration (i.e. continuing educational programs for ministers) to make you a better leader? ☐ Yes ☐ No

CHURCH EXPERIENCE:

1. When did you accept Jesus Christ as your personal Savior? _____

2. Have you been baptized with the Holy Spirit with the initial evidence of speaking with other tongues (Acts 2:4)?

☐ Yes ☐ No

Is this and other evidences and/or gifts of the Holy Spirit regularly manifested in your life?

☐ Yes ☐ No

3. Have you been baptized in water according to Matthew 28:19?

☐ Yes ☐ No

4. Have you been sanctified and are you being sanctified?

☐ Yes ☐ No

Please give a brief explanation _____

5. Have you read the BIBLE through at least once?

☐ Yes ☐ No

6. Do you believe the BIBLE to be the inerrant Word of God?

☐ Yes ☐ No

7. How long have you been a member of the IPHC? _____

Other denominations? _____

8. If you are transferring, from what denomination/fellowship are you transferring? _____

9. Place of local IPHC church membership _____

10. Have you previously held credentials with the IPHC or another denomination?

☐ Yes ☐ No

11. If yes, when? _____ with whom? _____

Please list previously held credentials. _____

12. Does your spouse hold credentials in the IPHC?

☐ Yes ☐ No

13. Have you read the IPHC 2017-2021 Manual?

☐ Yes ☐ No

14. Are you in agreement with the Articles of Faith of the IPHC?

☐ Yes ☐ No

15. Are you in agreement with the Covenant of Commitment and Guidance of the IPHC? ☐ Yes ☐ No
16. Do you know without a doubt that you are called of God into Christian ministry? ☐ Yes ☐ No
17. What is your ministry calling? ☐ Pastor ☐ Evangelist ☐ Other _____
18. What Gifting (1 Cor. 12 – 14) do you operate in? _____
19. Type of ministry in which you are currently engaged _____
20. Supervisor (if applicable) _____
Name Address
21. Position Held: ☐ Senior Pastor ☐ Church Staff ☐ Evangelist
☐ Missionary ☐ Bible College Instructor
☐ Other (Explain) _____
22. Give a brief summary of your experience in church leadership: _____

23. If you are applying for a license other than a local church minister's license, do you understand you are amenable to the Quadrennial Conference and the Conference board? ☐ Yes ☐ No
24. Realizing that as ministers/leaders we are stewards of His resources and conscious of Him in the management of that trust, will you faithfully return a tenth (full tithe) of all income into the "store house"? The "storehouse" for the minister is the Conference treasury; for the Local Church Minister not under pastoral appointment it is the local church treasury. ☐ Yes ☐ No
25. Do you understand that failure to comply with the tithing rule could mean a forfeiture of your credentials? ☐ Yes ☐ No
26. Will you cooperate with the denominational programs at the local, conference, and general levels and lead your people by example? (This includes reporting systematically and consistently on forms provided.) ☐ Yes ☐ No
27. Have you ever, for any reason, been dismissed from another organization or had your credentials revoked? ☐ Yes ☐ No
 If Yes, explain, giving the name of the organization and reason for dismissal on a separate sheet of paper.
28. If you reach a place where you are out of harmony with the ministry vision of the IPHC, will you surrender your license/ordination certificate to your conference superintendent? ☐ Yes ☐ No

Signed: _____ Date: ____/____/____



Local Church Ministers License Recommendation Letter

(Recommendation of Pastor and Local Church)

I, _____ (pastor), recommend
_____ (candidate) to the Conference as a
candidate for local church ministers license. He/She has been faithful to the local church, has
demonstrated spiritual maturity, leadership qualities and other evidences of a call to the ministry.
He/She is also recommended by the _____ Pentecostal
Holiness Church.

Remarks: _____

Date

Pastor's Signature

Date

Church Secretary's Signature

This is a confidential referral - Please remit directly to the Conference office.

AUTHORIZATION AND RELEASE

CRIMINAL BACKGROUND CHECK

I, the undersigned, having filed an application for credentials with the Pacific Western Network Ministries of the International Pentecostal Holiness Church, consent to have the Conference secure a national background check on me as an individual.

I hereby release, discharge, and exonerate the Pacific Western Network Ministries of the International Pentecostal Holiness Church, its agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, record, and other information or the investigations made by or on behalf of the above-named Conference. The Conference shall not be required to verify any information received during the course of its investigations, and shall not be liable for acting on the basis of any information, which later appears to have been false or incomplete.

I have read and signed the foregoing Authorization and Release as my own free act and deed.

Signed: _____

Please complete the following and return with your completed application:

Please print clearly

Name: _____ Date of Birth: _____

Address: _____

Race: _____ Gender: () Male () Female

Social Security Number: _____

Drivers License Number: _____ State: _____

INFORMATION AUTHORIZATION AND RELEASE

I, THE UNDERSIGNED, HAVING FILED AN APPLICATION FOR CREDENTIALS WITH THE Pacific Western Conference (herein referred to as "Conference" of the International Pentecostal Holiness Church consent to have an investigation made as to the conduct of my personal affairs, my moral character, professional reputation, fitness for the ministry, and such further information as may be received by or reported to the above-named Conference. I agree to give any further information which may be required in reference to my past history.

I authorize and request every person, firm, company, corporation, governmental agency, court, association, church, educational facility, or institution having control of any documents, records, and other information pertaining to me to furnish to the Conference of the International Pentecostal Holiness Church any such information, including documents, records, or other information regarding charges or complaints filed against me, formal or informal, pending or closed, and to permit the above-named Conference or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

I hereby release, discharge, and exonerate the Conference of the International Pentecostal Holiness Church, its agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigations made by or on behalf of the above-named Conference. The Conference of the International Pentecostal Holiness Church shall not be required to verify any information received during the course of its investigations, and shall not be liable for acting on the basis of any information which later appears to have been false or incomplete.

I have read and signed the foregoing Authorization and Release as my own free act and deed.

Signature

STATE OF _____ COUNTY OF _____

Subscribed and sworn before me this _____ day of _____, 20____

Notary Public

My commission expires: _____

CONFERENCE OFFICE USE ONLY

Date received in Conference office _____

Approved _____ Deferred _____ Denied _____

☐ Local Church Minister's License ☐ Minister's License ☐ Certificate of Ordination ☐ Reinstatement

Date applicant notified ____/____/____ Certificate/Care—mailed/awarded ____/____/____

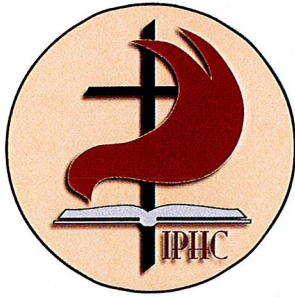
Superintendent's Signature _____

If applicant is a ministerial transfer (from another denomination) complete and forward this form to the General Superintendent's Office.

I ☐ do ☐ do not approve this transfer. Completed on this ____ day of _____, 20____

General Superintendent's Signature _____

(Original will be returned to Conference and a copy will be retained by the General Superintendent.)



EVALUATION OF APPLICANT FOR MINISTERIAL CREDENTIALS Pacific Western Network Ministries International Pentecostal Holiness church, Inc.

I. _____ of _____ has applied for ministerial credentials in the Pacific Western Network Ministries of the International Pentecostal Holiness Church. The Conference board and ministerial credentials committee/board would appreciate your frank and unbiased estimate of this applicant as a potential minister of the Gospel of Jesus Christ, holding credentials in this organization. Under law, the applicant may examine this evaluation in his/her file any time, unless the applicant waives the right to review this evaluation.

☐ I waive my right to review or examine this evaluation, and your comments will be treated confidentially.

Signed: _____

☐ I reserve the right to examine this evaluation.

Signed: _____

II. Evaluation:

- A. How long have you known the applicant? _____
- B. In what capacity? _____
- C. To your knowledge, has the applicant lived a consistent Christian life? If not, please explain; using the opposite side of this sheet if necessary.
- D. Please give your evaluation of the applicant by rating him/her on the following items:

	Weakness							Strength		
1 - Seriousness of purpose	1	2	3	4	5	6	7	8	9	10
2 - Self-motivation	1	2	3	4	5	6	7	8	9	10
3 - Concern for others	1	2	3	4	5	6	7	8	9	10
4 - Emotional Stability	1	2	3	4	5	6	7	8	9	10
5 - Ministerial Potential	1	2	3	4	5	6	7	8	9	10
6 - Personality	1	2	3	4	5	6	7	8	9	10
7 - Honesty	1	2	3	4	5	6	7	8	9	10
8 - Family Relationships	1	2	3	4	5	6	7	8	9	10
9 - Morality	1	2	3	4	5	6	7	8	9	10

E. Would you recommend this applicant's ministerial character without reservations? Please use the opposite side of this sheet if necessary.

Signed _____ Position/Occupation _____

Address _____

Date _____ Phone _____

Please return this form to: Pacific Western Network Ministries P.O. Box 2250 Clovis, CA 93613