MINISTRY APPLICATION

Instructions: This application should be provided to the Administrative Offices at least two weeks prior to your scheduled interview. The Ecclesiastical Board will use it to consider your request for licensing, installation or ordination.

Date:			_			
☐ Minister's Licens	se 🗆 Fi	ve-Fold Ministr	y Office:			
☐ Elder Candidate		eacon Candidat	e 🗆 Ot	her:		
		<u>APPLICAN</u>	T'S INFORM	<u>IATION</u>		
Full Name:					☐ Male	☐ Female
Address:						
City:			State:		Zip:	
Phone:						
Email:						
Social Security #:						
Date of Birth:						
Marital Status:	☐ Single	☐ Married	☐ Divorced	☐ Widowed		
IF MARRIED, Spouse	e's Name:					

EDUCATION INFORMATION

List all schools attended and degree earned.

School	Name	Year Graduated	Degree/Major
High School			
College/Seminary			
Other			
	RELIG	IOUS EXPERIENCE	
Describe your call i	nto the ministry:		
Describe your conv	ersion: (How have you chan	nged?)	
Are you filled with t	he Holy Ghost?	yes 🗆 no	
Have you had any s	piritual lapses in your walk v	vith God?	□ no
If yes, explain:			

CHURCH RELATIONS

Record of Church membership (last three years)

Year	Church	Served as *
* Sunday School Te	eacher, Usher, Music Director, Youth Leader or Pastor, e	etc.
Have you ever bee	n licensed or ordained in Shiloh Restoration Tabernacle	e? □ yes □ no
Have you ever bee If yes, please expla	en involved in church trouble of any kind?	s 🗆 no
Are you in full s	ympathy and hearty accord with the standards, do	octrines, and government of Shiloh
Restoration Taber	nacle? \square yes \square no	
Will you wholehea	rtedly support the Church and its institutions?	□ yes □ no
What experience h	nave you had thus far in preaching/teaching?	
How many would v	you estimate were converted under your ministry durir	ng the past two years?

PERSONAL INFORMATION

Are you in good health? \square yes \square no
If no, what are your reasons?
If married, does your spouse support you in your commitment to fulfill your calling? \Box yes \Box no
If no, what are your reasons?
Have you been divorced? \square yes \square no
If married, are you now living with your spouse? \Box yes \Box no
If married, are you now living with your spouse? \Box yes \Box no
If no, what are your reasons?
Have you ever been arrested, convicted or plead "no contest" at any time? \Box yes \Box no
Have you ever been accused of child molestation, exploitation or abuse? $\ \square$ yes $\ \square$ no
If yes to either of the above questions, please explain:
Applicant's Signature:
Date:

A WORD TO APPLICANTS

Submission of this application to the Ecclesiastical Board indicates that you have already completed the required Course of Study and meet the requirements pertaining to the ministry/office to which you are applying.