

**System Requirements:** Adobe Reader 8 (free), Email account, internet connection.

Adobe Reader 8 requires Mac OS 10.4 or greater and Windows XP or greater. Free upgrades are at [www.adobe.com](http://www.adobe.com). Please do this prior to opening a course file.

### **Computer Skill Requirements:**

1. Able to type answers into form fields,
2. Knowledge of saving documents to your computer or floppy disk and how to find them to reopen later,
3. Knowledge of opening documents in a specific program (Adobe Reader)
4. Able to Compose & Receive email with attachments.
5. Able to navigate from one page to another in Adobe Reader 8.

### **How to Complete Your Application**

Locate the file you downloaded and open it.

**Where is it?** *Check first to see if it has automatically opened in Adobe Reader. If not, often the PDF file is on your 'desktop' or in the 'temp' folder. It might be easier to click on your browser file menu at the top and located the downloads' window. You may then double-click on it and it will open in your Adobe Reader.*

### **F.A.Q. and HELP**

#### **Can't Save the Document or Answers?**

Some browsers will download and preview the PDF document. Therefore, you are not actually working on a downloaded document. So, save the PDF document to your computer. Then, find the PDF document (using Windows explorer or Search) and double click the document to open in Adobe Reader.

#### **How to Answer Questions**

Each answer blank is a data field. The field should show up as a blue box. Click in the field and type your answer. Use the tab key to move from field to field.

#### **When finished with questions**

Click the 'Submit' button found by the signature. (You will need to be connected to the internet.)

**If you use webmail**, like Yahoo, Gmail, etc., first save the application file.

If you click the Email button at the end of the application, it will ask you to save it to My Documents. Do so.

Next login to your email. Start a new message.

Attach the PDF file to a new email.

Address it to: Go2GAM@aol.com

Click send.

## INSTRUCTIONS

After downloading, You may open the PDF (by double clicking it if necessary)

1. Complete the application on your computer by typing your answers.
2. Once you've typed the answers in and entered your electronic signature, SAVE the FILE (Click File, Save As).
3. Make sure you attach the completed pdf application to an email and return with your other documents by email.

**Please Note:** A recent photo of yourself and the membership dues must be submitted with the application. Please see application instructions below. The application will not be processed until the above is received.

### *Please read these instructions before submitting an application for ministerial credentials*

- (1) Complete the application form electronically or by hand.

*(If you are unable to print the application form you may request a copy to be sent to you by regular mail. Either call the office at 602-277-1953 or send email to: [Go2GAM@aol.com](mailto:Go2GAM@aol.com)*

- (2) **ENCLOSE A PHOTO OF YOURSELF-** A fairly recent photo must be submitted with the application or it will not be processed. Most any kind of photo will do but please do not send anything larger than a 4 x 6.

- (3) Complete all the requested information. Use N/A for areas that do not pertain to you.

- (4) **If applying for ordination,** please include a copy of any ordination certificate you may have or a copy of your degree or diploma showing you have completed a Bible College or Seminary course. We will not issue an Ordination Credential unless the above documentation is received.

- (5) **Please note:** The recommending party must be in the ministry.

- (6) **Please enclose the annual membership dues** along with the "one-time" \$5 application processing fee. Please do not send CASH. You may remit by check or money order. You may also request a credit or debit card authorization form.

- (7) **Email the Application** along with any supporting documents to: [Go2GAM@aol.com](mailto:Go2GAM@aol.com)

or by postal mail:

GOSPEL ALLIANCE MINISTRIES - 3233 W Peoria Ave - Suite 101 - Phoenix, AZ 85029

- (8) **IMPORTANT -** The application for ministerial credentials will not be processed until a completed application, recent photo and membership dues are received.

# GOSPEL ALLIANCE MINISTRIES

3233 W. Peoria Avenue - Suite 101 – Phoenix, AZ 85029 USA  
602-277-1953 – FAX 602-995-0052

## APPLICATION FOR PERSONAL MINISTERIAL CREDENTIALS

Type or print all information in a legible manner, Thank you!

*Check type of credential you are applying for:* >  EXHORTER  GENERAL LICENSE  ORDINATION

### PERSONAL PROFILE

Your full name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home address: \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Home (\_\_\_\_) \_\_\_\_\_ Wk (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_ Website: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female

Marital Status: \_\_\_Single \_\_\_Married \_\_\_Separated \_\_\_Divorced \_\_\_Widow/Widower

Are you a citizen of the United States? \_\_\_Yes \_\_\_No

Country of Birth: You \_\_\_\_\_ Spouse \_\_\_\_\_

Have you ever been charged with: Sexual Harassment or Child Molestation \_\_\_Yes \_\_\_No

Have you ever been convicted of: Sexual Harassment or Child Molestation \_\_\_Yes \_\_\_No

Do you use tobacco in any form? \_\_\_Yes \_\_\_No

Do you drink any type of alcoholic beverages? \_\_\_Yes \_\_\_No If yes, what? \_\_\_\_\_

### SPIRITUAL

Are you a "Born Again" Christian?  Yes  No  Not Sure

In what year were you saved? \_\_\_\_\_

Have you been water baptized by immersion?  Yes  No

Do you believe the Gifts of the Spirit are operational today?  Yes  No  Not Sure

What is your primary ministerial calling: Check one only

\_\_\_Pastor \_\_\_Associate Pastor \_\_\_Evangelist \_\_\_Teacher \_\_\_Lay Minister \_\_\_Missionary

\_\_\_Music Ministry \_\_\_Chaplain \_\_\_Other \_\_\_\_\_

Are you in full time ministry? Yes No

How much time do you devote to ministry each week? \_\_\_\_\_

How are you financially supported? \_\_\_\_\_

### CHURCH INFORMATION

Do you attend church on a regular and consistent basis? Yes No Sometimes

Name of your home church: \_\_\_\_\_ Pastor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Web site: \_\_\_\_\_ Your position \_\_\_\_\_

### MINISTERIAL INFORMATION

Have you ever been credentialed with any organization or church? Yes No

Are you currently credentialed with any church or organization? Yes No

Have you been ordained by the laying on or imposition of hands? Yes No

Have you read our Statement of Faith and do you agree with it? Yes No

Have you read our Code of Ethics and do you agree to abide by them? Yes No

Check all areas where you have had experience: Pastoring Evangelism

Teacher Youth Ministry Music Ministry Lay Ministry Missionary Outreach

### EDUCATION

Highest grade level you reached: High School \_\_\_\_\_ College \_\_\_\_\_ Seminary \_\_\_\_\_

Degrees or Diplomas you have earned: \_\_\_\_\_

### RECOMMENDATIONS

Give ministerial recommendation: \_\_\_\_\_ Phone \_\_\_\_\_

Relationship of recommending party: \_\_\_\_\_

On my oath as a Christian Minister I hereby declare that all information given hereon is true to the best of my knowledge. I understand that my credentials, if approved, are renewable on an annual basis. Please find enclosed my membership dues and a recent photograph of myself.

Signature \_\_\_\_\_

### OFFICE USE ONLY –

Date App Rec'd \_\_\_\_/\_\_\_\_/\_\_\_\_ Dues \$ \_\_\_\_\_ How Paid \_\_\_\_\_ Date approved \_\_\_\_/\_\_\_\_/\_\_\_\_ Cert sent \_\_\_\_/\_\_\_\_/\_\_\_\_

## CREDIT / DEBIT CARD AUTHORIZATION



You may use your credit / debit card for membership dues. Please make sure all the information is legible and complete. Once information has been processed this form will be shredded. We do not store credit/debit card information nor will it be used for any other purpose than that which is intended.

**Check type of card you are using:**  Visa  Master Card  Discover  Amex\*

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

3 Digit number on signature panel (Use the last 3 numbers on back side of card) \_\_\_\_ \_

\*American Express card: Use the last 4 numbers on the front of the card: \_\_\_\_ \_

Name as it appears on the card: \_\_\_\_\_

Billing address for this card: \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Telephone number associated with this card: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Debit my charge/debit account for the indicated amount: \$ \_\_\_\_\_

Signature