

TYPE OF CREDENTIALIING REQUSTED

Name: Social Security #: Home Phone: Social Security #: Home Phone: Social Security #: Home Phone: Social Security #: Fax Number: Fax Numb	DEMOGRAPHIC INFORMATION (Plea	, .		,	
Employment Status: Student Part Time Full Time Self-Employed Retired Disabled Type of Work: Have you ever been arrested, charged or convicted for any criminal act? NATIONALITY I min the United States On a Green Card. Yes No (If YES, Please provide a copy)					
Home Phone: Cell Phone: Office Phone: Howe Site: Fax Number: MARITAL STATUS: Single Married Remarried Divorced Separated Widow/Widower					
Website:					
MARITAL STATUS: Single Married Divorced Separated Widow/Widower If ever separated, divorced or remarried, please fully explain on a separate sheet of paper. Name, Age, and Relationship of Individuals (including Spouse) living in your Home: Name Age Relationship Employment Status: Student Part Time Full Time Self-Employed Retired Disabled Type of Work: Have you ever been arrested, charged or convicted for any criminal act? Yes No (If YES, please fully explain NATIONALITY Are you a United States Citizen? Yes No If NO, what is your Nationality? I am in the United States on a Green Card. Yes No (If YES, Please provide a copy)					
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I am in the United States on a Green Card. \Box Yes \Box No (If YES, Please provide a copy)	Are your all nited States Citizen 2 7 V	os 🗆 No If NO what is	Syour Nationality		
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Lamin the United States on a VISA. Vos. No. (If VSS Please Provide a Com/)	I am in the United States on a Green C	ard. 🗌 Yes 🔲 No (If)	YES, Please provide	a copy)	
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	If VES type of VISA and Expiration Date	٥٠			



MINISTERIAL CREDENTIAL APPLICATION

MINISTRY HISTORY			
When did you become a "Born Again" Christian?		(Mo	onth/Year)
Do you have a Theology Degree or Equivalent?] Yes □ No (If YE	S, provide a transcript or cop	y of degree)
If NO, please attach a Re	esume outlining your C	hristian Ministry experience.	
Why do you believe you have been called into the	Ministry? (Please atta	ach a testimony of your callin	g)
Are you currently credentialed, or have you	been previously cre	dentialed, with another C	hurch, Denomination o
Association? \square Yes \square No If YES, please exp	plain:		
Have you ever been disciplined or had your crede	ntials revoked by a form	mer church, denomination o	r association?
☐ Yes ☐ No If YES, please explain:			
Have you even been removed from a pastoral or l	eadership position for	cause?	
☐ Yes ☐ No If YES, please explain:			
Are you CURRENTLY active in Ministry? ☐ Yes	\square No If YES, \square	Full Time	
☐ Senior Pastor ☐ Associate Pastor ☐	Children's Ministry	☐ Youth Ministry	☐ Adult Ministry
☐ Music Ministry ☐ Teaching Ministry ☐] Home Missionary	☐ International Missiona	ry □Chaplain
Other:			
What is your PRIMARY Ministry?			
How Long Have You Served In This Position?			
HOME CHURCH / PASTORAL REFERENCES			
Name of the Home Church You Attend:			
Address:			
Phone:			
Senior Pastor:			



MINISTERIAL CREDENTIAL APPLICATION

List a minimum of TWO pastoral and/or leadership references who are familiar with your ministry.

Please also submit a letter of reference from each of these references.

Name	Phone	Relationship
EDUCATIONAL BACKGROUND		
\square High School or Equivalent \square College	or Technical Institute $\ \square$ Theologic	al Training Other:
List Diploma and/or Degree (Certificate) Ear	ned:	
	From:	
	From:	
	From:	
Courses Taken in Ministry-Related Fields (No		-
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Compaths Francisco de Callaca 2 D Van	No. 16 VECb. a	
Currently Enrolled in College? ☐ Yes ☐		
If YES, course of study and anticipated gradu	uation date:	
STATEMENT OF FAITH		
☐ Yes ☐ No I BELIEVE God is the lovi	ng creator of all that exists.	
☐ Yes ☐ No I BELIEVE God is eternal	and completely good, completely ju	ust and completely holy.
☐ Yes ☐ No I BELIEVE Jesus Christ is the Son of God.		
\square Yes \square No I BELIEVE the Bible is the authoritative rule of faith and conduct for all humanity.		
☐ Yes ☐ No I BELIEVE the Bible is inspired by God and is useful to teach us what is true.		



MINISTERIAL CREDENTIAL APPLICATION

STEWARDSHIP	
☐ Yes ☐ No	Are your finances in good order?
☐ Yes ☐ No	Have you EVER been in serious financial problems?
☐ Yes ☐ No	Are you consistently giving to your church a regular basis?
☐ Yes ☐ No	Do you pledge to support this Association financially?
Please check the	Category that will apply if you are accepted
☐ As a Licensed	or Ordained Minister of Grace Global Alliance, I pledge to contribute a minimum of \$25.00 per month (or a
minimum of \$300	per year) to fulfill my commitment.
credentialed ministe	Global Alliance issued credentials expire on August 31st of each calendar year. Renewal forms will be mailed to all ers on or around July 1st and must be completed, returned and processed for the continuation of your credentials beyond states. Contributions to conventions, missionary endeavors or special projects does not count toward your annual commitments.
ATTESTATION	
accepted into the Cexemplify a Christia understand GGA re	I attest and affirm I have answered all the questions above honestly and truthfully, to the best of my ability. If I am Grace Global Alliance, I will fulfill my calling to the best of my ability, with the help of the Lord. I commit myself to an testimony above reproach at all times and seek to model the life of Christ both personally and interpersonally. I serves the right to suspend, revoke or refuse to renew the credentials of any minister at any time where the is a generals, character or integrity. I have read the Grace Global Statement of Faith and I agree with these tenants.
it may take up to 90	\$25.00 check or money order as an APPLICATION FEE along with my first month's ministerial contribution. I understand days for my application to process and I will not be recognized as a credentialed minister of Grace Global Alliance until ents are received, all applicable fees are paid and my credentials have been officially issued.
Printed Name:	
Signature:	
Date Signed:	

Make Checks Payable and Return this Completed Form To:
Grace Global Alliance
100 Carmona Place
Hot Springs AR 71909



MINISTERIAL TITHE COMMITMENT

As a credentialed minister through Grace Global Alliance, I covenant to support the ministry with my prayers, as well as a minimum monthly donation of \$25 to support its ongoing activities. By signature below, I authorize the electronic remitting of support via bank draft. This authorization will remain in effect until such time as revoked by me, in writing.

Signature	Date Signed
Printed Name	
Address	-
City / State / Zip	-
Phone	-
I authorize the following charges to be drafted from m	ny checking account:
[] \$25 Initial Application Fee	
[] \$25 Recurring Ministerial Financial Support	
[] as a Recurring Financial Gift	
[] as a One-Time Financial Gift	

Please Include a Copy of a VOID Check

Remit To:
Grace Global Alliance
100 Plaza Carmona Place
Hot Springs Village AR 71909

Fax This Form To: 501-984-5788