



Date: \_\_\_\_\_

### MINISTERIAL CREDENTIALS FORM

Please indicate applying for:

Ordained Minister    Licensed Minister    Commissioned Christian Worker    Lay Preacher

#### GENERAL INFORMATION:

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Office Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Have you ever been divorced?    Yes    No

If yes, please give date of divorce: \_\_\_\_\_   If remarried date of remarriage \_\_\_\_\_

If yes, please give detailed description of the circumstances of the divorce:

*Please give a detailed statement of the circumstances. Normally a waiting period of 5 years post-divorce is a minimum requirement. Please contact the CCCC office for further information.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Children:	Names	Ages	Gender
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____



**Ministerial Credentials Form— (cont.)**

**PROFESSIONAL INFORMATION:**

Of what church are you a member? \_\_\_\_\_

Is church where you are a member congregationally governed?  Yes  No

Denominational affiliation? \_\_\_\_\_

Where is your present ministerial standing? \_\_\_\_\_

Other organizations of which you are a member: \_\_\_\_\_

\_\_\_\_\_

Why are you seeking the standing for which you have applied? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ORDINATION RECORD:**

ORDAINED?  Yes  No

Date of Ordination: \_\_\_\_\_ Place of Ordination: \_\_\_\_\_

Ordaining Body: \_\_\_\_\_

Repository of Ministerial Credentials (Name): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

May we write for a transfer:  Yes  No

Individuals seeking Ordained Minister membership or transferring from another body should provide the following items:

- 1. A copy of the written call to the ordination council
- 2. A copy of the minutes of the ordaining council including a roster of the churches and ministers attending.
- 3. Any papers presented by the candidate at the ordination council
- 4. A copy of the service of ordination
- 5. A copy of the ordination certificate.

Please attach copies of these items to this application.  
(If any of the above items are not available, explain fully on a separate sheet.)



**Ministerial Credentials Form—** (cont.)

**EDUCATION:**

High School: \_\_\_\_\_ Location: \_\_\_\_\_

Degree: \_\_\_\_\_ Dates attended: \_\_\_\_\_

Bible College: \_\_\_\_\_ Location: \_\_\_\_\_

Degree: \_\_\_\_\_ Dates attended: \_\_\_\_\_

Major: \_\_\_\_\_

College/University: \_\_\_\_\_ Location: \_\_\_\_\_

Degree: \_\_\_\_\_ Dates attended: \_\_\_\_\_

Major: \_\_\_\_\_

Seminary: \_\_\_\_\_ Location: \_\_\_\_\_

Degree: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Major: \_\_\_\_\_

Other Graduate Study: \_\_\_\_\_

Continuing Education: (*workshops, seminars, etc.*) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Awards or Honors: \_\_\_\_\_

\_\_\_\_\_

**SECULAR EMPLOYMENT EXPERIENCE:** (*List chronologically.*)

Please include: dates of employment, position/title, employer and location

1. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Ministerial Credentials Form—** *(cont.)*

**SECULAR EMPLOYMENT EXPERIENCE:** *(cont.)*

3. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CHRISTIAN SERVICE EXPERIENCE:** *Professional and Volunteer.*

Please include: dates of service, position/title; church/organization name and location

1. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



**Ministerial Credentials Form—** (cont.)

**References:** *Please attach a letter of reference from the church board and/or denomination you are now serving. Also, provide names, complete mail and e-mail address, and phone numbers of four (4) personal references.*

1. \_\_\_\_\_  
 \_\_\_\_\_

2. \_\_\_\_\_  
 \_\_\_\_\_

3. \_\_\_\_\_  
 \_\_\_\_\_

4. \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_

**PERSONAL STATEMENTS:** *Please elaborate on the following (limit to 3000 - 5000 words total). If you would you may attach your answers on a separate sheet. Thank you.*

1. Your doctrinal beliefs on each of the statements listed in our CCCC statement of Faith, with Scriptural references.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Your views on the nature and role of the Church and the place of Christianity among world religions.

\_\_\_\_\_

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\_\_\_\_\_





**Ministerial Credentials Form—** (cont.)

5. List what you believe to be your spiritual gifts for ministry.

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6. Personal doctrinal statement, additional references or other documents you may wish to attach to your application file.

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**AFFIRMATION:** *Please initial to indicate your affirmation.*

\_\_\_\_\_ I hereby affirm that I wholeheartedly accept the Statements of Faith and Polity, and I agree to abide by the Code of Ethics for Ministers of the Conservative Congregational Christian Conference. I also accept the Constitution and By-laws of the CCCC as guiding documents for the CCCC.

\_\_\_\_\_ If accepted into membership I promise to support the Conference by my influence and means as the Lord enables me.

\_\_\_\_\_ It is my purpose, with God's help, to keep my conduct above reproach, to live a life worthy of my calling, and to abstain from habits that do not glorify God or edify His church.

\_\_\_\_\_ I will seek the counsel of the Conference Minister, Regional Minister, or Area Representative in situations involving serious division between me and the staff, church board, or congregation, and in cases of serious personal problems affecting my ministry.

\_\_\_\_\_ I realize that a personal interview with a representative(s) of the CCCC is a part of this application, and that any expenses incurred by me for this interview are my responsibility.

*I hereby attest that the above information is complete and accurate to the best of my knowledge and that I can be held responsible for any inaccurate or missing information.*

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_

**NOTE:** This application requires a \$125.00 application fee. Please include a check made out to CCCC with your application and mail to the Home Office at the address below, or you may go to [www.cccusa.com](http://www.cccusa.com) / GIVING. Choose "application fee" from the drop down menu and enter the amount of \$125.00 to complete your application. After your application and payment are received you will be contacted to complete a separate background check (included in the fee). Thank-you.