



2021 MINISTERIAL QUESTIONNAIRE

Confidential

Return of this Questionnaire is required for renewal of all Ministerial License and Conference Care Memberships, and also affects the continued good standing of all Ministerial Members. YOUR ASSISTANCE TO RETURN AS SOON AS POSSIBLE IS GREATLY APPRECIATED. **Please fill out and return to the Home Office NO LATER THAN DECEMBER 15, 2020.**

NOTE: *No ministerial membership cards will be provided after January 31, 2021.*

(To fill out ONLINE, or as a PDF form and return via email, go to www.cccusa.com/resources)

PERSONAL INFORMATION:

Last Name _____ First _____ Middle _____

Title Rev Dr Rev Mr Ms Mrs

Spouses name _____

Home Address _____

City _____ State/Province _____ Postal Code _____

Country _____

Mailing Address
(If different than Home address) _____

City _____ State/Province _____ Postal Code _____

Country _____

Preferred Phone _____

Preferred E-mail for CCCC communication _____

CCCC STANDING:

Ordained Associate Licensed Lay Preacher Commissioned Christian Worker Conference Care

Are you still employed in the same or another similar ministry in which your present ministerial standing is needed?

YES NO

Do you have any personal circumstances that might affect your current CCCC credentials status?
(*eg. marital, church, personal, or changes in doctrinal position*) If so, please explain.

Name of the church where you are a member: _____

Is the church where you hold your membership congregationally governed? YES NO

YOUR CHRISTIAN SERVICE: Full-time Part-time Retired Volunteer

Place of service _____ Position/ responsibility: _____

Address _____

City _____ State/Province _____ Postal Code _____

Country _____

Denominational Affiliation of present place of service _____

ORDAINED MINISTERS AND COMMISSIONED CHRISTIAN WORKERS:

YES NO Do you still desire to retain your ministerial credentials with the CCCC?
If no, please explain your reasons on a separate sheet of paper.

LICENSED MINISTERS:

YES NO Do you hereby request the renewal of your license for another year?
What steps have you taken this year in preparation for ordination?

LAY PREACHERS:

YES NO Do you hereby request the renewal of your standing for another year?
(Note: Renewal will be dependent on your home church's continued affirmation of your standing.)

STUDENTS UNDER CONFERENCE CARE:

What school are you attending? _____

Expected Graduation Date: _____

On a separate page, please write a brief report of your academic and practical progress in preparation for ministry.

INTERNATIONAL WORKERS:

Where are you presently serving? _____

Organization(s) you now serve: _____

Home Base Address: _____

Would you like to be contacted about serving in one of our Ministry Priority areas? YES NO

___ Church Development

___ Church Multiplication

___ Conference Care

ADDITIONAL COMMENTS:

STATEMENT OF COMMITMENT and AFFIRMATION

(Please initial beside each of the statements below to affirm your agreement):

___ I affirm that I remain in firm agreement with the CCCC Statement of Faith (Attached)

___ I affirm that I remain committed to the principles of the CCCC Statement of Polity (Attached)

___ I affirm that with the help of Almighty God I will seek to live my life of Christian ministry in accordance with the CCCC Code of Ethics for Ministers (Attached)

SIGNATURE: _____

Date: _____

Thank-You— for your partnership in the Lord's work through the CCCC, and for your assistance to keep the Conference records accurate and up-to-date.