



Free Pentecostal Church of God Association

P.O. Box 31462 Cincinnati, Ohio 45231

Ministerial Credential Application

Please Print I Thessalonians 5:12
Name: _____ Date of Birth: _____

First Middle Last

Address: _____
Street City State Zip

Married or Single _____ Male or Female _____

Phone # _____ Cell Phone # _____

How long have you been preaching? _____

Have you held Minister Credentials before? _____ If so, how long and with whom?

Name of your home church? _____

Address: _____
Street City State Zip

Who is your pastor? _____
Name Phone #

Have you or your companion been married more than once? _____ If yes please explain.

Is there any reason that you cannot fulfill your financial obligation with this Association?
_____ If so please explain. _____

Have you read the bible through from Genesis to Revelation? _____

Have you studied the manual of the Free Pentecostal Church of God? _____

Will you abide by, and teach the Doctrine as outlined in the manual? _____

References: _____

Applicant's Signature: _____

Recommended by: _____

To be signed by Minister in full fellowship with said Association

Annual Dues are presently \$125.00 and can be paid any time during the calendar year
