



# CHRISTIAN MINISTRIES INTERNATIONAL APPLICATION

Type of Credential applied for:

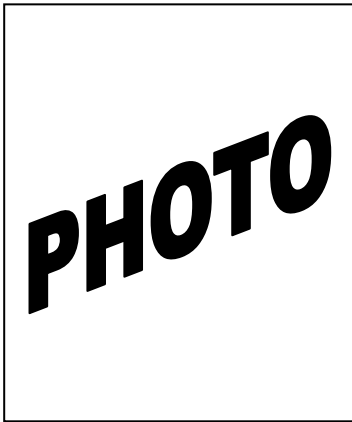
Recognized Member  Licensed Minister  Ordained Minister  
(US ONLY)

**License:** Must have finished two years of theological training from approved institution.

Must know and reflect calling on life. Consideration is given to time served in specific ministry.

**Ordained:** Must have held license for minimum of 2 years and have proven ministry.

**Application fee (see attached schedule), 2 passport photos and required references must accompany this application form.**



## GENERAL INFORMATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
First Middle Last

MAILING ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

COUNTRY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ FACEBOOK: \_\_\_\_\_

TELEPHONE NUMBERS: Home \_\_\_\_\_ Work \_\_\_\_\_  
 Mobile \_\_\_\_\_ Other \_\_\_\_\_

OCCUPATION/CAREER: \_\_\_\_\_ EMPLOYER'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ COUNTRY OF BIRTH: \_\_\_\_\_

DATE OF SALVATION: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ DATE OF WATER BAPTISM: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

DATE OF HOLY SPIRIT BAPTISM: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

MARITAL STATUS: \_\_\_\_ Single \_\_\_\_ Married \_\_\_\_ Divorced \_\_\_\_ Widow \_\_\_\_ Engaged

If married, NAME OF SPOUSE: \_\_\_\_\_  
First Middle Last

DO YOU CURRENTLY HOLD RELIGIOUS CREDENTIALS WITH ANY OTHER RECOGNIZED ORGANIZATION OR FELLOWSHIP?

YES / NO IF YES, NAME OF ORGANIZATION: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY? NO / YES If, yes, please explain on a separate sheet.

**Int'l Checklist:** References \_\_\_\_\_ Application Verified \_\_\_\_\_ Contact \_\_\_\_\_ Date: \_\_\_\_\_

**Board Use Only:** Approved for \_\_\_\_\_ R \_\_\_\_\_ L \_\_\_\_\_ O Effective Date: \_\_\_\_\_

# CHRISTIAN MINISTRIES INTERNATIONAL APPLICATION REFERENCE REQUEST

DATE: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_  
Last First Middle

**Recognized Member** applicants require 2 references (Pastor and Friend/Colleague). **License and Ordained** applicants require 3 references.  
Please be sure to verify phone numbers and email addresses. Inform your references that you have listed them on your application.

## REFERENCES:

**PASTOR:** \_\_\_\_\_  
Last First

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

Telephone for Contact: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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**MINISTER:** \_\_\_\_\_  
Last First

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

Telephone for Contact: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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**FRIEND/COLLEAGUE:** \_\_\_\_\_  
Last First

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

Telephone for Contact: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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**\* Please be sure to verify telephone numbers and email addresses. Inform your references that you have listed them on your application.**

# CHRISTIAN MINISTRIES INTERNATIONAL APPLICATION

## BACKGROUND INFORMATION

EDUCATION: **Please attach any copies of relevant certificates and diplomas to verify education.**

**Seminary/Theological School:** \_\_\_\_\_

City, State, Country: \_\_\_\_\_

Courses and Date Completed: \_\_\_\_\_

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

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**College:** \_\_\_\_\_

City, State, Country: \_\_\_\_\_

Courses and Date Completed: \_\_\_\_\_

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

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**High School:** \_\_\_\_\_ Date completed: \_\_\_\_\_

City, State, Country: \_\_\_\_\_

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MINISTRY:

**Place of Ministry:** \_\_\_\_\_

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

Describe ministry: \_\_\_\_\_

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**Place of Ministry:** \_\_\_\_\_

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

Describe ministry: \_\_\_\_\_

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**Place of Ministry:** \_\_\_\_\_

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

Describe ministry: \_\_\_\_\_



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# CHRISTIAN MINISTRIES INTERNATIONAL APPLICATION

## DOCTRINAL VIEWS

1. Have you read and do you understand what CMI believes? YES / NO

If NO, please explain: \_\_\_\_\_

2. Is there any aspect of our beliefs that differ from yours? YES / NO

If YES, please explain: \_\_\_\_\_

3. Have you received and confessed Jesus Christ as your personal Savior? YES / NO

4. Do you agree with the ministry and work of CMI? YES / NO

5. If applying for "Recognized Member", do you feel you may wish to pursue higher credentials in the future? YES / NO

**For those applying for License or Ordination ONLY, please explain in writing, your doctrinal views for the following. Be brief - if preferred, you may type your views on a separate sheet. Please substantiate your answers with Biblical verses.**

### SALVATION

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### THE TRINITY

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### WATER BAPTISM

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**Continued:**

HOLY SPIRIT BAPTISM

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REPENTANCE

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THE RETURN OF CHRIST

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