

APOSTOLIC MINISTRIES FOR CHRIST, INC. SEC. NO. DNO-95-000214 1443 SOUTHVILLA MA-A, DAVAO CITY, PHILIPPINES TEL. No. 006382-4402746

APPLICATION FOR MINISTERS MEMBERSHIP

CANDIE	DATE ID APPLYING FOR WHICH LICENSE?	☐ MINISTER ☐ Worker without Ins		/orker ith Insurance
Before	the signing of this Application here are sor	me few questions regarding o	f your backgrour	nd:
1.	Have you been baptized by immersion in			
2.	Have you received the Holy Ghost since you believed? (Acts 19:2)			
3.	Have you or your companion been divorce and re-married?			
4.	Is your married-companion are living for God in holiness?			
5.	How many children do you have? Are they living in spiritual standing of life?			
6.	Do you believe and practice of giving tithes?			
7.	Are you already ordained? In what church you were ordained?			
	How long have you been working with your former church?			
9.	What is the reason why you separated an	nd resigned from them?		
10.	Have you ever been refused credentials b If yes, then Why?	y any organization?		
11.	Are you called by God to minister the Gospel?			
12.	Have you read the articles of faith of the Apostolic Ministries for Christ, Inc.?			
13.	Will you support the Apostolic Ministries for Christ, by giving your financial such as tithes, love offering and contributions?			
14.	Have you been striving to provide things honest in the sight of all men, since your conversion such as payin your just (bill) etc?			
15.	5. Are you willing to abide with the teachings of Apostolic Ministries for Christ?			
16.	. Are you willing to practice the standard of Holiness based to Articles of Faith?			
17.	. Are you willing to be observed by a Pastor for 1 year in the Apostolic Ministries for Christ?			
18.	. For male, are you willingly to keep your haircut short above your ears and off your shirts collar?			
19.	Do you practice and observe celebrating any fashion of pagan holidays such as Christmas, Easter Sunday Valentines, All Souls Day, etc?			
20). If yes, are you willing to quit?			
	Do you practice, observe, and believe the Lord's Supper and Foot Washing literally?			
	Are you willing to measure up to the qualification given in Timothy 3:1-7?			
	What will be your Ministry? Local Pastor Non-Local Pastor Worker			
24. Name of the recommended person with signature Signature:				
24.	Name of the recommended person with s	Signature	Jigilatule.	
	Personal Information	Note: ID pi	cture must	
	Name:	wear	of Formal	
	Address:		e, long sleeve w/	
	Add C33.		r a Tuxedo.	
	Civil Status: Height:		a raxeao.	ID No.:
				ID No
	Date of Birth:			
	Age:			
	Contact Number:			
	In case of Emergency: Name:			
	Address:	_	Applicant	 Signature
	Contact Number:	_		
	Signatures of:		DTR IONATH/	AN CURELO SP
	Santian Oversoon		PTR. JONATHAN CUBELO SR. National Chairman Overseer	
	Section Overseer:			
	Name of Section Leader wi	th Signature		
	District Overseer:			
	Name of District Leader wit	h Signature	PTR. MARK	V. LOPEZ

National Secretary Overseer