

Fellowship of Churches & Ministers International

PO Box 2165 * Reidsville, GA 30453 * (912) 557-6507

Application for Ministerial Affiliation

INSTRUCTIONS: This application must be filled out in duplicate with a \$50.00 fee and a current photograph. Any minister joining FCMI must indicate the religious organization granting him/her ministerial status. FCMI recognizes that the status of ministers is a function of the local church, and therefore is not a part of its responsibility.

Date of application: _____

Name _____ Home Phone (____) _____

Home Address _____ City _____ State _____ Zip _____

email address _____ Web site address _____

Date of Birth ____/____/____ Sex _____ Race _____

Married ____ [Spouses name: _____] Single ____ Divorced ____ Widowed ____

Current Ministerial Status: Ordained ____ Licensed ____ Date of Original Ministerial Status _____

Church Granting or Recognizing Ministerial Status: _____

Address _____ City _____ State _____ Zip _____

Current ministry position (pastor, teacher, evangelist, missionary, etc) _____

Current ministry name _____ Current ministry location _____

Current ministry telephone # (____) _____

Have you previously held Ministerial credentials? _____ (If YES, please furnish the following):

Type of Credentials held: _____

Original Date of Credentials: _____

Church or Organization: _____

Current Address: _____

City _____ State _____ Zip _____

Have you ever been a member of the FCMI? _____

Have you ever been disciplined by the FCMI or any other ministering body? Yes No

If yes, please explain _____

In what field of ministry are you presently engaged? _____

Do you agree with our Constitution? _____

Will you do your best to be an active part of the FCMI? _____

Your Signature: _____

(CONTINUED ON REVERSE)

Current FCMI member recommending you for affiliation:

Signature: _____ Phone _____

Address of current member _____ City _____ State _____ Zip _____

(FCMI recommending member must sign this application before it can be processed.)

Area Presbyter's signature _____

SEND COMPLETED APPLICATION TO:

FCMI

PO Box 2165

Reidsville, GA 30453

SPONSORSHIP INFORMATION

(To be completed and forwarded by Sponsoring Church to FCMI Secretary)

Church Sponsor: _____ Phone _____

Address _____ City _____ State _____ Zip _____

We have known applicant for _____ years.

Please give a brief history of applicant's association with sponsoring church:

Since FCMI exercises no authority over any messenger of the churches (Article Two, Section I), I understand that as sponsor of this applicant, this church must assume responsibility for any disciplinary action.

Date: _____ Signature _____ Position _____

Fellowship of Churches and Ministers International

*P.O. Box 2165 * Reidsville, GA 30453*

REFERENCE FORM

Name of applicant _____
Last/Family First Middle
Address _____
City _____ State _____ Zip _____

I, the above applicant WAIVE any rights I have to read or obtain copies of this recommendation.

Signature _____ Date _____

The above member has applied for membership in the Fellowship of Churches and Ministers International. The FCMI is a fellowship of ministers and churches established to provide a way by which churches and ministers together can work in the Kingdom of God to promote the work of our Lord Jesus Christ among the nations of the world. To achieve the goals set forth in the Constitution and By-laws, all members of the Fellowship commit themselves to work in cooperation with each other in the unity of the Holy Spirit and the bond of peace. It does not exercise ecclesiastical authority or control over its members or churches. It does not ordain ministers but it does issue annual credentials which serve as an acknowledgment that, to our knowledge, the minister is of sound moral and ethical character and is a person sound in Biblical doctrine and worthy of commendation as a dedicated minister of the Gospel of our Lord Jesus Christ.

Serious consideration will be given to your comments, therefore we ask that you complete this form carefully. Your prompt attention in returning this form (within 7 days) is important. Thank you for your assistance. Please check the following and comment in the spaces provided. Thank you.

1. What is your relationship to the applicant?
 Employer Pastor Elder Friend
2. How well do you know the applicant?
 Very well Well Casual For how long? _____
3. Does he/she display high moral standards? Yes No Explain

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4. In your consideration, which of the following would best describe the applicant's Christian experience?
 Mature Contagious Genuine & growing Superficial
 5. How well does the applicant relate to fellow workers in the church?
 Peacemaker Encourages others Easily offended Has a divisive spirit

6. Is the applicant in fellowship with good standing in a church? Yes No
Which church? _____
7. Do you consider that the candidate embraces sound Biblical doctrine? Yes No
If your answer is "no", please explain what you understand his unsound beliefs to be. (Please use a separate sheet of paper for a full explanation, if needed.) _____

8. Would you recommend the applicant as a minister of the Gospel of Jesus Christ? Yes No
If no, explain _____

9. Has the applicant been arrested for or accused of any immoral or unethical behavior?
 Yes Not to my knowledge If your answer is "yes", please explain.

10. Please comment on the applicant's family background (if known) _____

11. In your opinion, what are the applicant's motives for joining the FCMI? _____

12. Please add any relevant remarks you consider important to the application of the applicant: _____

13. Please give us the name, address and phone number of a second person who knows the applicant from whom we can obtain a reference.
Name _____ Street _____
City _____ State _____ Zip _____ Phone _____

Your signature: _____ Date: _____

Print Name: _____

Address: _____

City _____ State _____ Zip _____

Phone (_____) _____ Fax: (_____) _____

Fellowship of Churches and Ministers International

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•First Reference•

Dear _____

_____ has applied for membership in the Fellowship of Churches and Ministers International. The FCMI exists to encourage fellowship among ministers and churches and to observe standards of conduct and belief which will please our Lord Jesus Christ. Annual credentials are issued acknowledging that the member is a person of good character and sound doctrine who is an honorable minister of the Gospel.

_____ has given your name for a character reference. We would appreciate it if you would complete the enclosed form and return it to our office in the enclosed envelope as soon as possible.

The information you provide will be held in confidence. Also, you are asked to furnish us the name and address of a second person we can use as a character reference. _____ understands that we are asking for the second reference.

Thank you for your kind attention to this matter and for taking the time in your busy schedule to complete the form and return it to us. May the Lord bless you abundantly.

Fellow Servants in Christ,



Secretary

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