



Ministerial Credentials Application Handbook

Rev. Kelly Hardcastle, President

Email: pastork@c3troy.com

**CCM
2221 Alexandria Crossing
Troy MO 63379**

Dear Friend,

Thank you for your interest and desire to hold credentials along with Christ Centered Ministries (CCM), a division of Christ-Centered Fellowship, Inc. (CCF, Inc.). In order to hold credentials in this organization an individual must satisfactorily complete the application process as set forth by the Christ-Centered Fellowship, Inc. Articles of Incorporation, by-laws and credentials committee/board. This process is in place in order to provide opportunities for those who feel called and committed to service in Christ's kingdom, and to provide qualified "laborers in the harvest" (Matthew 9:38).

A check list is provided below to insure the proper completion of the application process.

Accepted applicants will be able to use the Christ-Centered Fellowship, Inc. IRS 501(c)(3) designation to give a tax deduction credit for donations.

- ☐ 1. Application Form. Please complete and return
- ☐ 2. Three evaluation forms. (pages 9-11 of this application) On each form you must either waive the right to examine or reserve the right to examine, then sign on line provided.
 - ◆ Send one form to your local pastor.
 - ◆ Send one form to a businessman/employer.
 - ◆ Send one form to a person of your choice who is not related to you by family. **Each of these people will mail their evaluation directly to the address provided.**
- ☐ 3. Please note that a formal academic degree is not required for credentials with CCM. You may send transcripts of any or all formal academic work completed that you feel have a bearing on your qualifications as an applicant for ministerial license. Please provide a catalogue, if available, from the given institution(s) for course descriptions.
- ☐ 4. If you or your spouse has experienced a divorce, please send a copy of your divorce decree.
- ☐ 5. The other items not included but considered essential reading are as follows:

These items can be accessed on our website. Go to www.c3troy.com, click the "Credentialing Info" tab

 - 1. What We Believe
 - 2. Articles of Faith
- ☐ 6. **Mail entire application along with a check for \$75.00.** (\$50.00 application fee and a \$25.00 fee for a criminal background check) to:

CCM
2221 Alexandria Crossing
Troy MO 63379

Thank you for your interest. May the Lord guide you and sustain you as you pursue your calling into ministry with Christ Centered Ministries.

MINISTERIAL CREDENTIALS APPLICATION

Christ Centered Ministries
2221 Alexandria Crossing, Troy MO 63379
Website: www.c3troy.com

Application for: *Please check the license desired*

☐ Christian Worker ☐ Exhorter ☐ License Minister ☐ Ordained Minister

Because a pastoral position in ministry requires a license or ordination, Christ Centered Ministries has prayerfully chosen not to license or ordain women according to Paul's instructions found in 1 Timothy 2:12-14.

☐ Evangelistic Ministry

1. Full Name _____
Address _____
City _____ State _____ Zip _____
Ministry Name _____
 2. Phone: Home (____) _____ Office (____) _____ Cell (____) _____
 3. E-mail address _____
 4. Date of Birth _____ Place of Birth _____
Nationality _____
 5. Sex: ☐ Male ☐ Female
 6. Social Security No. _____
 7. Current Marital Status ☐ Single ☐ Married ☐ Divorced * ☐ Widow/er
(* Please include a copy of the divorce decree and give details of divorce along with circumstances, use separate sheet of paper.)
 8. Spouse's Full Name _____
 9. Spouse's Date of Birth _____
 10. Anniversary Date _____
 11. Do you/your spouse have any prior marriages? ☐ Yes ☐ No
* If yes, how was the marriage terminated? ☐ Divorce ☐ Widowed ☐ Annulment
 12. Names and ages of children: _____

 13. Give three references: Include (1) pastor, (2) a businessman, and (3) one other person not related.
(See Recommendation/Evaluation Form)
- | <u>Name</u> | <u>Address</u> | <u>City/State/Zip</u> | <u>Phone</u> |
|-------------|----------------|-----------------------|--------------|
| (1) _____ | _____ | _____ | _____ |
| (2) _____ | _____ | _____ | _____ |
| (3) _____ | _____ | _____ | _____ |

14. Have you ever been charged and/or convicted of a felony or misdemeanor (*excluding minor traffic offenses*)?
☐ Yes ☐ No If yes, explain charge or conviction – use separate sheet of paper.
15. Have you ever been charged and/or convicted of child molestation, child abuse, assault, or sex offenses of any nature?
☐ Yes ☐ No If yes, explain charge or conviction – use separate sheet of paper.
16. Have you ever had an extra-marital affair (sexual physical intimacy with another person outside the covenant of your marriage)? ☐ Yes ☐ No If yes, explain – use separate sheet of paper.
17. The following questions are not intended to be overly intrusive, but rather, in a highly sensitive area, to clarify the applicant's qualifications to ministry. The committee responsible for screening applicants has determined the value of these questions as appropriate in the interests of applicants' full disclosure. If you answer "yes" to any of these questions, please include a separate sheet of paper describing any counseling, or restoration programs you have completed in response to these issues.

Have you ever been unfaithful to your spouse?

- a. Physical affair with another person that involved touching even though not intimately sexual?
☐ Yes ☐ No If yes, explain – use separate sheet of paper
- b. Emotional affair with another person? By this we mean: obsession with someone outside the covenant of your marriage involving inappropriate contact (phone, personal meetings, letters, e-mails, etc.) and time spent with that person in inappropriate places (private settings, or questionable contexts or situations).
☐ Yes ☐ No If yes, explain – use separate sheet of paper
- c. Habituation to pornography or sexual fantasy?
☐ Yes ☐ No If yes, explain – use separate sheet of paper

Employment History: (*Secular and Christian Service*)

1. Current or last place of employment:

| | |
|--------------------------|--------------------|
| Company/Church Name | Phone # |
| Address | Direct Supervisor |
| City/State/Zip | Date of Employment |
| Job Title/Responsibility | Annual Salary |

2. Other Employment in the last ten years:

| <u>Company/Church Name</u> | <u>Job Title/Responsibility</u> | <u>Salary</u> | <u>Dates of Employment</u> |
|----------------------------|---------------------------------|---------------|----------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |

Education:

1. Circle highest grade/level completed

High School ☐ ☒ 9 ☒ 10 ☒ 11 ☐
College ☐ ☐ ☐ ☐ ☐
Graduate/Seminary ☐ ☐ ☐ ☐ ☐

Year Graduated _____

Year Graduated _____

Year Graduated _____

2. List the Bible schools, colleges, or seminaries you have attended: give dates, courses completed and degrees earned

(Forward copies of transcripts to the Church Office)

3. Have you completed the Discovering C3 workshop?

☐ Yes

☐ No

Christian/Church Experience:

1. When did you accept Jesus Christ as your personal Savior? _____

2. Have you been baptized in water according to Matthew 28:19?

☐ Yes

☐ No

3. Do you believe in sanctification as a instant event when you ask Jesus to forgive you of your sins as well as a lifelong process where we become more and more like Christ?

☐ Yes

☐ No

Please give a brief explanation if necessary

4. Have you been baptized with the Holy Spirit with the initial evidence of speaking with other tongues? *(Acts 2:4)*

☐ Yes

☐ No

5. How long have you been a member of the C3? _____

6. Have you previously held credentials with another organization?

☐ Yes

☐ No

If yes, when/ with whom? _____

7. Has your spouse held credentials with another denomination?

☐ Yes

☐ No

If yes, when/ with whom? _____

8. Have you ever, for any reason, been dismissed from another organization or had your credentials revoked? ☐ Yes ☐ No
If yes, explain, giving the name of the organization and the reason for dismissal. _____
9. Do you know without a doubt that you are called into Christian ministry? ☐ Yes ☐ No
10. Give a brief summary of your experience in church leadership _____

18. Have you read the Bible through at least once? ☐ Yes ☐ No
19. Do you believe the Bible to be the inerrant Word of God? ☐ Yes ☐ No
20. Are you in agreement with the Articles of Faith of the CCF, Inc.? ☐ Yes ☐ No
21. Are you in agreement with What We Believe ☐ Yes ☐ No
☐ Yes ☐ No
25. If you reach a place where you are out of harmony with the ministry vision of the CCF, Inc. will you surrender your license/ordination certificate to your conference superintendent? ☐ Yes ☐ No
26. Why do you want to pursue ministerial credentials and how will this help you accomplish your goals? _____

27. Evangelistic ministries (EM's) will be required to submit an annual financial statement of revenue and expenditures by January 31st to remain in compliance with IRS 501(c)(3) requirements. EM's will need to apply for their own Employee Identification Number (EIN), their State's exemption from sales tax, Articles of Incorporation, fictitious name registration and any other legal documents needed to operate the ministry.
28. Annual fees are due by January 31st.
Fees: Christian Workers \$25, Exhorter \$40, Licensed Minister \$75, Ordained Minister \$100, Evangelistic Ministry \$150

* *Shaded items must be included with submitted application.*

Signature of Applicant

_____/_____/_____
Date of Application

* Note: If not a transfer of credentials, skip the following section and proceed to the next section below.

• **FOR TRANSFERS ONLY:**

| | | | |
|---|---|--|---------------------------------------|
| Transferring from what denomination/fellowship | | | |
| Current position/place of ministry | | | |
| Supervisor if applicable | | Phone # | |
| Other positions held: | <input type="checkbox"/> Senior Pastor | <input type="checkbox"/> Missionary | <input type="checkbox"/> Church staff |
| | <input type="checkbox"/> Bible College Instructor | <input type="checkbox"/> Other (explain) | <input type="checkbox"/> Evangelist |

INFORMATION AUTHORIZATION AND RELEASE

I, the undersigned, having filed an application for credentials with Christ Centered Ministries (herein referred to as "CCM") consent to have an investigation made as to the conduct of my personal affairs, my moral character, professional reputation, fitness for the ministry, and such further information as may be received by or reported to the above-named CCM. I agree to give any further information which may be required in reference to my past history.

I authorize and request every person, firm, company, corporation, governmental agency, court, association, church, educational facility, or institution having control of any documents, records, and other information pertaining to me to furnish to CCM any such information, including documents, records, or other information regarding charges or complaints filed against me, formal or informal, pending or closed, and to permit the above-named CCM or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

I hereby release, discharge, and exonerate CCM and CCF, Inc., its agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigations made by or on behalf of the above-named CCM. CCM shall not be required to verify any information received during the course of its investigations, and shall not be liable for acting on the basis of any information which later appears to have been false or incomplete.

I have read and signed the foregoing Authorization and Release as my own free act and deed.

Signature

Blank Page

Applicant for Ministerial License Reference

Christ Centered Ministries

(Employer/Businessman)

_____ has applied for ministerial credentialing with Christ-Centered Fellowship, Inc.. The Credentials Committee would appreciate your frank and unbiased estimate of this applicant as a potential minister of the Gospel of Jesus Christ, holding credentials in this organization. Under law, the applicant may examine this evaluation in his/her file any time, unless the applicant waives the right to review this evaluation.

() I waive my right to review or examine this evaluation, and your comments will be treated confidentially.

Signed: _____

() I reserve the right to examine this evaluation.

Signed: _____

Evaluation

How long have you known the applicant? _____

In what capacity? _____

To your knowledge, has the applicant lived a consistent Christian life? If not, please explain; use the opposite side of this sheet if necessary.

Please give your evaluation of the applicant by rating him/her on the following items (1 being worst, 5 being best):

| | | | | | |
|------------------------|---|---|---|---|---|
| Seriousness of Purpose | 1 | 2 | 3 | 4 | 5 |
| Self-Motivation | 1 | 2 | 3 | 4 | 5 |
| Concern for others | 1 | 2 | 3 | 4 | 5 |
| Emotional stability | 1 | 2 | 3 | 4 | 5 |
| Ministerial potential | 1 | 2 | 3 | 4 | 5 |
| Personality | 1 | 2 | 3 | 4 | 5 |
| Honesty | 1 | 2 | 3 | 4 | 5 |
| Family Relationships | 1 | 2 | 3 | 4 | 5 |
| Morality | 1 | 2 | 3 | 4 | 5 |

Would you recommend this applicants ministerial character without reservation? Please use the opposite side of this sheet if necessary.

Signed _____ Position/Occupation _____

Address _____

Date _____ Telephone: _____

This is a confidential referral. Please remit directly to:

CCM

2221 Alexandria Crossing

Troy MO 63379

Applicant for Ministerial License Reference

Christ Centered Ministries

(Friend)

_____ has applied for ministerial credentialing with Christ Centered Ministries. The Ministerial Credentials Committee would appreciate your frank and unbiased estimate of this applicant as a potential minister of the Gospel of Jesus Christ, holding credentials in this organization. Under law, the applicant may examine this evaluation in his/her file any time, unless the applicant waives the right to review this evaluation.

() I waive my right to review or examine this evaluation, and your comments will be treated confidentially.

Signed: _____

() I reserve the right to examine this evaluation.

Signed: _____

Evaluation

How long have you known the applicant? _____

In what capacity? _____

To your knowledge, has the applicant lived a consistent Christian life? If not, please explain; use the opposite side of this sheet if necessary.

Please give your evaluation of the applicant by rating him/her on the following items (1 being worst, 5 being best):

| | | | | | |
|------------------------|---|---|---|---|---|
| Seriousness of Purpose | 1 | 2 | 3 | 4 | 5 |
| Self-Motivation | 1 | 2 | 3 | 4 | 5 |
| Concern for others | 1 | 2 | 3 | 4 | 5 |
| Emotional stability | 1 | 2 | 3 | 4 | 5 |
| Ministerial potential | 1 | 2 | 3 | 4 | 5 |
| Personality | 1 | 2 | 3 | 4 | 5 |
| Honesty | 1 | 2 | 3 | 4 | 5 |
| Family Relationships | 1 | 2 | 3 | 4 | 5 |
| Morality | 1 | 2 | 3 | 4 | 5 |

Would you recommend this applicants ministerial character without reservation? Please use the opposite side of this sheet if necessary.

Signed _____ Position/Occupation _____

Address _____

Date _____ Telephone: _____

This is a confidential referral. Please remit directly to:

CCM

2221 Alexandria Crossing

Troy MO 63379

Applicant for Ministerial License Reference

Christ Centered Ministries

(Local Pastor)

_____ has applied for ministerial credentialing with Christ-Centered Fellowship, Inc.. The Ministerial Credentials Committee would appreciate your frank and unbiased estimate of this applicant as a potential minister of the Gospel of Jesus Christ, holding credentials in this organization. Under law, the applicant may examine this evaluation in his/her file any time, unless the applicant waives the right to review this evaluation.

() I waive my right to review or examine this evaluation, and your comments will be treated confidentially.

Signed: _____

() I reserve the right to examine this evaluation.

Signed: _____

Evaluation

How long have you known the applicant? _____

In what capacity? _____

To your knowledge, has the applicant lived a consistent Christian life? If not, please explain; use the opposite side of this sheet if necessary.

Please give your evaluation of the applicant by rating him/her on the following items (1 being worst, 5 being best):

| | | | | | |
|------------------------|---|---|---|---|---|
| Seriousness of Purpose | 1 | 2 | 3 | 4 | 5 |
| Self-Motivation | 1 | 2 | 3 | 4 | 5 |
| Concern for others | 1 | 2 | 3 | 4 | 5 |
| Emotional stability | 1 | 2 | 3 | 4 | 5 |
| Ministerial potential | 1 | 2 | 3 | 4 | 5 |
| Personality | 1 | 2 | 3 | 4 | 5 |
| Honesty | 1 | 2 | 3 | 4 | 5 |
| Family Relationships | 1 | 2 | 3 | 4 | 5 |
| Morality | 1 | 2 | 3 | 4 | 5 |

Would you recommend this applicants ministerial character without reservation? Please use the opposite side of this sheet if necessary.

Signed _____ Position/Occupation _____

Address _____

Date _____ Telephone: _____

This is a confidential referral. Please remit directly to:

CCM

2221 Alexandria Crossing

Troy MO 63379