



PENTECOSTAL ASSEMBLIES OF JESUS CHRIST

127 Church Street – Reesville, Ohio 45166 – www.pajci.org

APPLICATION FOR LICENSE OR CREDENTIALS

APPLICANT FULL NAME		DATE OF BIRTH	
STREET ADDRESS		CITY	STATE ZIP
HOME PHONE	CELLPHONE	EMAIL ADDRESS	
MALE/FEMALE	AGE	MARITAL STATUS (Single, Married, Divorced, Separated)	

- Have you been baptized in the Name of Jesus Christ by immersion in water for the remission of sins?
Y/N _____ When? _____
Where? _____
- Have you received the gift of the Holy Ghost with the evidence of speaking in other tongues?
Y/N _____ When? _____
Where? _____
- Are you remarried?
Y/N _____
- Are you the husband of one wife?
Y/N _____
- Has your marital status changed since your conversion?
Y/N _____ Describe, if necessary. _____

- What is the extent of your education? _____
- Will you submit to a credit examination, criminal background check and sexual background check?
Y/N _____
- Are you called of God to minister the Gospel of the Lord Jesus Christ?
Y/N _____
- Are you making any special preparations for the ministry?
Y/N _____ If so, what? _____

- What is your principal calling? (Pastor, Evangelist, Teacher, Missionary, Assistant Pastor, etc.)

- Are you now actively engaged in the ministry?
Y/N _____ In what capacity? _____
- How long have you been actively pursuing your ministry?

- List information about your ministry in reverse chronological order covering the last of the following:

LOCATION	POSITION HELD	TERM	DUTIES

14. List three (3) ordained ministers of the Gospel who can verify your ministry and labor during the time categorized above.

NAME	ADDRESS	TELEPHONE

SPOUSE INFORMATION (IF MARRIED)

SPOUSE FULL NAME		DATE OF BIRTH	
STREET ADDRESS		CITY	STATE ZIP
CONTACT PHONE	AGE	MARITAL STATUS (Single, Married, Divorced, Separated)	

15. Have you been baptized in the Name of Jesus Christ by immersion in water for the remission of sins?
 Y/N _____ When? _____
 Where? _____

16. Have you received the gift of the Holy Ghost with the evidence of speaking in other tongues?
 Y/N _____ When? _____
 Where? _____

17. Are you remarried?
 Y/N _____

18. Has your marital status changed since your conversion?
 Y/N _____ Describe, if necessary. _____

19. Do you acknowledge your husband's call to the ministry and support it by presenting yourself in submission to him as your head and to Christ as his head, according to the books of Timothy, Titus and Corinthians?
 Y/N _____

20. Signify the names and ages of children that are living with you and if they are converted.

CHILD'S FULL NAME	AGE	CONVERTED (Y/N)

21. Do your children render due obedience and submit themselves according to Ephesians so as to further your ministry?
 Y/N _____

APPLICANT QUESTIONS, CONTINUED

22. Do you currently have a pastor?
 Y/N _____ If so, please record his information.

PASTOR'S NAME		PASTOR'S STREET ADDRESS	
CITY	STATE	ZIP	PHONE NUMBER

23. Record the information of the assembly you currently attend.

CHURCH NAME		CHURCH'S STREET ADDRESS	
CITY	STATE	ZIP	CHURCH PHONE NUMBER
CHURCH WEBSITE (if any)		ORGANIZATION AFFILIATION (if any)	

24. Do you support the above assembly in attendance, tithes and offerings?

Y/N _____

25. Could your standing with this assembly be characterized as "under proper subjection," and would your Pastor attest to this claim?

Y/N _____

26. To whom are you presently giving your tithes?

Y/N _____

27. Are you currently ordained?

Y/N _____ If so, please provide the information below.

CHURCH OR ORGANIZATION BY WHOM YOU WERE ORDAINED			
ADDRESS		CITY	STATE
LOCATION OF ORDINATION		DATE OF ORDINATION	
OFFICIALS BY WHOM YOU WERE ORDAINED		CONTACT INFORMATION	

28. Have you held or do you hold a license or credential with any other apostolic organization?

Y/N _____ If so, with whom? _____

How long? _____

29. Have you ever been refused a license or credential by another apostolic organization?

Y/N _____ If so, by whom? _____

On what grounds or basis? _____

30. Will you plan for and attend organizational functions and uphold the organization at the local, district and national levels?

Y/N _____

31. Please check what you are applying for.

Local License	
General License	
Full Credentials (Ordination)	

DOCTRINAL POSITION

32. Do you believe, teach, support and practice the following doctrinal tenets? Mark Yes or No.

_____ The oneness of God

_____ Essentially repentance, water baptism by immersion in the Name of Jesus Christ for the remission of sins and the baptism of the Holy Ghost evidenced by speaking with other tongues as the salvation plan of God

_____ Man is the head of the home under Christ with the woman being in proper subjection to him, and that his cut hair and her uncut hair are outward symbols of this relationship (1 Corinthians 11:14 -15)

_____ Holiness of lifestyle and separation from the world

- _____ Modesty of dress
- _____ The Lord's Supper and Foot Washing are to be taken literally
- _____ Receiving of fermented wine at communion as the blood of Jesus Christ
- _____ Giving of tithes and offerings for the support of the Lord's work
- _____ Integrity and uprightness should prevail in all interpersonal relationships within the church and without, according to Corinthians and Titus
- _____ The duty of saint and minister alike to show respect and be obedient to all requirements of civil government that are not contrary to the Word of God (Romans 13, Matthew 17:24-27; 22:17-21)
- _____ At the appearing of the Lord Jesus Christ in the clouds, the Church will be caught up to meet Him in the air
- _____ Pre Tribulation _____ Mid Tribulation _____ Post Tribulation
- _____ Once saved, always saved or the doctrine of unconditional eternal security

33. Please explain why you desire membership in the Pentecostal Assemblies of Jesus Christ, Inc.

REQUIRED SIGNATURES

By signing this application, you acknowledge that all statements made by you are correct and as truthful as possible.

Applicant: _____ Date: _____

Your Pastor: _____ Date: _____

Supporting Minister: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

CREDENTIAL COMMITTEE or DISTRICT BOARD MEMBERS SIGNATURES/COMMENTS