

INDEPENDENT ASSEMBLIES OF GOD INTERNATIONAL (Canada)

Rev. Paul McPhail, General Secretary
P.O. Box 653, Chatham Ont, N7M 5K8
Phone: (519) 352-1743, Fax: (519) 351-6070
E-mail: pmcphail@ciaccess.com, Website: www.iaogcan.com



Our Task Presenting the Gospel in Word and Deed to All Nations

FORM 3 – APPLICATION FOR ANNUAL CREDENTIAL RENEWAL

This form is to be filled in annually by all Commissioned Christian Workers, and Ministers who are Licensed or Ordained. Failure to fill in and return and renew annually will result in your credentials being revoked.

Applicants must forward **FORM 3** to the sponsoring Church for completion.

FORMS 3 must be returned to the Canadian Office before Renewal will be considered.

Mr. [] Mrs. [] Miss []

Full name of applicant: **PRINT CLEARLY** _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Date of Birth: _____ Are you over the age of 75 years? Yes [] No []

Phone: Area Code [] _____ Fax: Area Code [] _____

E-mail: _____ Website: _____

Marital Status: Single [] Married [] Divorced [] Remarried []

Credential you hold? Commissioned Christian Worker [] Licensed [] Ordination []

What has been your field of ministry during the past year? _____

Are you in active ministry? Yes [] No []

If yes, give the name and address of
Church/Ministry. _____

Date you attended the last Provincial or National Convention?

Do you find it necessary to subsidize your income with secular work? Yes [] No []

Does the reason for your original credential Commissioned Christian Worker, License or Ordination still apply?

If not, give the reason _____

Do you have a Provincial Certificate to Perform Marriages? Yes [] No []

Signature of Applicant: _____ Date: _____

COMMISSIONED CHRISTIAN WORKER, LICENSING OR ORDAINING CHURCH INFORMATION:

Church Name: _____

Church Address _____
City: _____ Province: _____ Postal Code: _____
Phone: Area Code [] _____ Fax: Area Code [] _____
E-mail: _____ Website: _____

Name and Address of Pastor of Commissioned Christian Workers, Licensing or Ordaining Church:

Pastor's Name _____ Address _____
City: _____ Province: _____ Postal Code: _____
Phone: Area Code [] _____ Fax: Area Code [] _____
E-mail: _____ Website: _____

Signature of Pastor: _____ Date: _____

Signature of Church Secretary: _____ Date: _____

A Renewal fee of \$170.00 should accompany this form. If the request is late, an additional late fee of \$30 is required. In the event that the application is not accepted, the fee will be returned in full. It is expected that the applicant will conscientiously answer all questions and if the circumstances have changed so that the candidate no longer requires credentials, that the applicant will frankly say so.

If financial hardship is a factor in not returning the application the candidate may confidentially write the General Secretary for special consideration. Failure to renew annually will result in your credentials being revoked.