

DOCUMENTS REQUIRED FOR INTER- REGIONAL TRANSFERS

1. Updated Photo- can be copy of ID or Credential
2. Ministerial Entry Document
3. Database
4. Inter- regional Transfer Information Form
5. Pastoral Certification - If you do not pastor
6. Presbyter Certification- If not pastoring
Regional letter notifying the transfer



PENTECOSTAL CHURCH OF GOD
International Movement
International Headquarters
P.O. Box 360455, San Juan, Puerto Rico 000936-0455
Email: ldpmisi@gmail.com



MEMBERSHIP APPLICATION

- Name _____ Phone Number: _____
- Physical Address: _____
- Postal Address: _____
- Age: _____ Date of Birth: _____ Place: _____
- Identity Number: _____
- Conversion Date: _____
- Marital Status single married widowed divorced
 divorced and remarried widowed and remarried
 married to divorced woman married (a) with a cousin(a)
- Children, ¿How many? _____
- Spouse's Name: _____ ¿Converted? Yes No
- ¿Are your children converts? Yes No Some
- Church of assistance _____
- Members in full in communion? _____
- Have you ever been misled? Yes No
¿When? _____ ¿Date of reconciliation? _____
Date Date
- Are you baptized by immersion? Yes No Holy Spirit Yes No
- What is your positions in the church? _____
- Do you pay your tithes in your church? Yes No
- Dis you belong to another denomination: Yes No If yes:
A. Name of the organization _____
B. Position occupied _____
C. Name and address of the president of the organization: _____
- Theological Preparation
A. College or Seminary: _____
B. Grade _____
- Academic Preparation with your grade _____
- Profession: _____
Properties, specify _____
- ¿Debts contracted? a) Bank - Balance _____ b) Others - Balance _____
- Do you have any disability? Yes No
If yes, explain _____
- Do you receive any disability pension? Yes No
- Have you ever been convicted of a felony? Yes No
If yes, explain _____
- What motivated you to make this request to our organization? _____

Submitted today, day: _____

Signature

SOPROMISE FORMAL DECLARATION

I, _____
I solemnly promise, so help me God, that if admitted into the Ministerial Body of the Pentecostal Church of God, I.M I accept all the provisions of this Church.

I further agree that upon discovery of any other information or fact not disclosed or omitted, voluntarily or involuntarily, in this application, that affects my ministerial position by conflict or inconsistency with the policies and principles of the Church, it is sufficient for my acceptance to be revoked at any time thereafter. It is sufficient for my acceptance to be revoked at any time thereafter.

I also promise to fulfill the obligations of the ministry, both spiritual and material, as well as to fulfill and uphold the Constitution and Bylaws which give me privileges and demand obligations. I will also conform to the Code of Ministerial Ethics.

SO PROMISE AND SO HELP ME GOD!

Signature

Afidávit un. _____

Sworn and subscribe before me by _____, of legal age
Applicant's name

_____, from _____
Marital Status Town or city

In his capacity as an applicant to the ministry of the Pentecosral Church of God, International Movement, to whom I attest as follow meet personally in the city of: _____, today: _____.



OFFICIAL USE

**COMMITTEE FOR THE EVALUATION OF APPLICATIONS
FOR ADMISSION TO THE MINISTRY
(CESIM)**

The Committee for the Evaluation of Applications for Entrance into the Ministry (CESIM), in its meeting to evaluate the candidates who are interested in joining the Ministerial Body of the Pentecostal Church of God I.M, of the Region, had the Good will to review this application for the entrance into the ministry, its documents and to interview the candidate and his or her spouse if married, in common agreement, we issue the following comment:

FAVORABLE

UNFAVORABLE

OTHER: _____

Date: _____

i. _____ **PRESIDENT**

ii. _____ **SECRETARY**

iii. _____ **MEMBER**

iv. _____ **MEMBER**

v. _____ **MEMBER**



FORMAL VOTE OR DECLARATION

I, _____
I solemnly promise, so help me God, that if admitted into the Ministerial Body of the Pentecostal Church of God, I.M I accept all the provisions of this Church.

I further agree that upon discovery of any other information or fact not disclosed or omitted, voluntarily or involuntarily, in this application, that affects my ministerial position by conflict or inconsistency with the policies and principles of the Church, it is sufficient for my acceptance to be revoked at any time thereafter. It is sufficient for my acceptance to be revoked at any time thereafter.

I also promise to fulfill the obligations of the ministry, both spiritual and material, as well as to fulfill and uphold the Constitution and Bylaws which give me privileges and demand obligations. I will also conform to the Code of Ministerial Ethics.

SO PROMISE AND SO HELP ME GOD!

Signature

Affidavit un. _____

Sworn and subscribed before me by _____, of legal age,
Applicant's name

_____, from _____
Marital Status Town or city

In his capacity as an applicant to the ministry of the Pentecostal Church of God, International Movement, to whom I attest

as follows meet personally in the city of _____, today _____.



Pentecostal Church of God, I.M

DATA BASE

_____ Date

A. PERSONAL ANAD FAMILY DATA:

1. Name: _____ Last Name: _____
2. Date of Birth: _____ Town, state: _____
Day/Month/ Year
3. Social Security Number or citizenship card: _____
4. Father's Name: _____
Mother's Name: _____
5. Profession or trade at the time of joining the Ministry: _____
6. Marital Status: () Single () Married () Widowed () Married more than once
() Widowed and remarried () Married to divorced () Married to a cousin
7. Date of marriage _____ Spouse Name: _____
8. Information of children under age and / or under their responsibility:

Name	Date of Birth (Day/moth/year)
_____	_____
_____	_____
_____	_____
_____	_____

B. ECCLESIASTICAL DATA:

1. Date of conversion: _____ Baptism in waters _____ Holy Spirit? _____
Day/Month/ Year Day/Month/ Year
2. Name of the church where you were baptized _____,
Name of the minister who baptized you: _____.
3. Name of the church where you were attending at the time you entered the ministry

4. Name of your Pastor, who I recommend to the Ministry _____
Presbytery Name _____
5. When I started in the ministry, I was granted/ recognize the degree of _____,
in the year _____, and I was: () ordained or () licensed in the year _____, by the
Region _____ or denomination _____. I currently hold
the degree of: _____.

C. STUDIES PERFORMED:

1. Last degree or secular studies _____
2. Other secular studies conducted _____
3. Theological studies and degrees completed

4. Other theological studies: _____

D. POSITIONS HELD:

1. In the church/ District (as a lay leader); _____

2. In the ministry _____

E. PASTORAL HISTORY: (Write here the places of the churches you have pastored, with the start date and the date of delivery.) _____

F. AWARDS RECEIVED:

G. PERSONAL SUGGESTION OR RECOMMENDATION:

(NOTE: if you need to add more information you may do so on a separate sheet of paper. Remember, this information is confidential and for the administrative use of our Pentecostal Church of God, I.M, and can be verified, it is no transferable. Thank you for your help).



Pentecostal Church of God, I.M

Inter-Regional Transfer Information Form:

Name: _____ Date: _____

Address: _____

Region to be Relocated: _____

Reasons for relocation: Relocation: __ Executive Appointment __ Job Offer __ Other __.

Mention of churches he has pastored in this region: _____

Evaluation of Executions in your last pastoral: Thriving () / Stable () / Decreasing ()

Other positions held in the past year:

Evaluation of other functions if applicable: Prosperous () / Stable () / Deficient ()

Report on your responsibilities for this Region during your membership:

(Answer yes or no)

- 1) He regularly attends his district's retreats and activities ()
- 2) Regularly attends regional activities ()
- 3) File your church's financial and statistical reports ()
- 4) Send report remittances and other payment on time ()
- 5) Maintains good behavior in church and community ()
- 6) Shows knowledge and fidelity to the Statement of Faith, Constitution and Bylaws ()

Mention skills or abilities that the person possesses to be considered a resource to help others:

Mention areas or situations in which the person may need some assistance:

Mention any other information that might be helpful to the better functioning of this person's ministry. Be objective.

We certify that the above information is offered to the best of our knowledge, can be verified by the documents or testimonies of other persons and is offered to be kept within the ethical parameters of the ministry and may be objected only by the person concerned. The users of this information will maintain this information under strict rules of confidentiality.

Regional President

Regional Secretary

*Stamp**

Confidential Classified Document

***** Date of receipt at the General Office _____.*

Signature of the General Secretary _____.

****** Date of receipt in the Receiving Region _____.*

Signature of the Regional Secretary _____.



PENTECOSTAL CHURCH OF GOD, I.M

PASTORAL CERTIFICATION

(Regulation Art II. Section H. Item #2 and item #18)

(Applies to inactive Ministerial Corps Members)

I, _____, by means of this writing and acting in my capacity as official Pastor, of the Pentecostal Church of God International Movement, Region _____ and located at _____, respectfully manifest, to the Regional Executive Committee, that _____, member of the Ministerial Body of this Ecclesiastical Organization, has requested to join our Church and is an active member since _____, thus fulfilling the statutory mandate of subjection of one of our churches and fulfilling the duties of members. He currently helps us or performs the work of: _____ among other activities.

Remarks:

Fraternally in Christ:

Pastor's signature: _____ Date: _____

Important Note: Dear pastor, we appreciate your help, you must fill out the form for members of the Ministry, who have credentials issued by the Regional Executive Committee, and who congregate in your church, please send it to the Secretary regional when requested at the time of a transfer.



PENTECOSTAL CHURCH OF GOD, I.M.

PRESBYTER CERTIFICATION

I, _____, by means of this writing and acting in my capacity as official Presbyter of the Pentecostal Church of God I. M, Region _____ and District at _____ respectfully manifest, to the Regional executive Committee, that _____, member of the Ministerial Body of this Ecclesiastical Organization, is an active member of our District, Thus Fulfilling the statutory mandate of subjection to our churches and fulfilling the duties of members.

District Participations: _____

Observations:

Remarks:

Presbyter Signature: _____

Date: _____

Important Note: Dear Presbyter, thank you for your help, you must fill out the form for members of the Ministry, who have credentials issued by the Regional Executive Committee, and who are members of your District, please send it to the Regional Secretariat when requested at the time of the transfer.