



GLOBAL APOSTOLIC ALLIANCE

RELATE INSPIRE EMPOWER

Membership Application (Please Print Clearly)

All information is considered confidential

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code Country

Phone: _____ Email _____

Credential you are seeking: Ordination License

(If you are unsure, please leave blank and we can discuss it during the interview).

1 Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

List countries in which you minister other than your place of residence.

2. Have you ever held ministry credentials? YES NO _____

3. Have you ever been convicted of a felony? YES NO

4. Are you involved in any current or pending litigation/court cases? YES NO

If yes to questions 3 or 4, explain: _____

Education

High School: _____ State/Country: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ State/Country: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ State/Country: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three references. At least one reference must be from an existing Omega Team member

1. Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address/email: _____

2. Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address/email: _____

3. Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address/email: _____

Ministry Organization (please begin with current/most recent. Leave blank if not working yet with a ministry.)

Ministry 1: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Paid: _____ Voluntary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Ministry 2: _____ Phone: _____

Address: _____ City/State: _____

Job Title: _____ Paid: _____ Voluntary: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Family Information

Marital Status: _____ Spouse's Name: _____

Date of Birth: _____ Years Married: _____

Is your spouse an active partner with you in your call? YES NO

Please briefly explain: (Continue on another sheet of paper if needed) _____

Please list dependent children:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Background Information

Please **type** on a separate single sheet of paper a summary/testimony of your spiritual journey. Make sure to include your upbringing, conversion experience, baptism in the Holy Spirit, your call to ministry, your gifting and your ministry experience.

Please **type** on a separate sheet of paper an explanation as to why you are seeking credentialing through Omega Team and for what reason you need credentials.

To better understand how you qualify for credentials, based on your own perception and the testimony of others do you see yourself as called to an **Ephesians 4:11** Five Fold Ministry?

Which one would best describe your sense of call?

Apostle Prophet Evangelist Pastor Teacher

Circle one as your main and underline a second or more if you believe you have a complimentary gift(s).

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

By signing this application, I declare that

- I have read and agree with the Global Apostolic Alliance's Statement of Faith*
- I agree to Global Apostolic Alliance conducting a background check as part of their due diligence in processing this application*
- I understand that any or all of my references may be contacted*

Signature: _____ Date: _____

(Please allow 2-4 weeks for proper processing and collecting references. If we have not acknowledged receipt of your application within 2 weeks of sending it to us, please feel free to email our office and we will follow up directly. Be sure to include a recent head and shoulders front facing medium to high resolution photo and a check or money order for the \$50 application processing fee).



GLOBAL APOSTOLIC ALLIANCE

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