



The Evangelical Christian Church in Canada

# APPLICATION FOR MINISTERIAL CREDENTIALS

Dear Applicant:

Thank you for applying for ministerial credentials with *The Evangelical Christian Church in Canada*.

Enclosed you will find an application which requests various aspects of information. This CONFIDENTIAL information will assist us in understanding your life and ministry journey in preparation for credentialed ministry.

Our overall purpose for collecting information is to assess your academic, spiritual, emotional and relational qualities for credential leadership.

## TO AVOID DELAY BE SURE TO ANSWER ALL QUESTIONS

After all questions have been fully answered, this application, along with a non-refundable application fee in the amount of \$75.00, should be returned to Central Office. This, along with any other application forms must be received before an interview will be scheduled with the Credentials Committee.

*Please note that all paperwork submitted becomes the property of The ECCC.*

The ECCC Central Office  
410-125 Lincoln Road  
Waterloo ON N2J 2N9

# APPLICATION FOR MINISTERIAL CREDENTIALS

Please PRINT all responses, and DO NOT staple the paperwork.

## 1. CREDENTIAL INFORMATION

Date of Application: \_\_\_\_\_

Are you:  applying for initial credentials  
 transferring from another denomination

Name of organization: \_\_\_\_\_

Indicate the credential for which you are applying:

Ordained  Licensed Minister  Certified Pastoral Counsellor  Certified Christian Worker

## 2. GENERAL INFORMATION *(Please include a colour passport sized photo with your application)*

a) Full name (as should appear on certificate): \_\_\_\_\_  
First Initial Last

b) Email Address: \_\_\_\_\_ Gender:  M  F

c) Street Address: \_\_\_\_\_ d) Phone: Home (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
 City: \_\_\_\_\_ Work (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
 Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Fax (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

e) Birth Date (M/D.Y): \_\_\_\_\_ Citizen (Country): \_\_\_\_\_

f) Birthplace \_\_\_\_\_ Province and Country: \_\_\_\_\_

## 3. APPLICANT'S MARITAL STATUS *(Indicate all categories that apply)*

a) Applicant's Current Marital Status  
 Single  Married  Widow(er)  Divorced  Remarried  Marriage annulled (civil only)  
 b) If you are divorced and remarried, is your former spouse living?  Yes  No  
 c) Are you married to someone who is "remarried"?  Yes  No  
 d) Name of spouse \_\_\_\_\_

## 4. CHILDREN

a) Names and birthdates of your children:

NAME	BIRTHDATE			NAME	BIRTHDATE		
	Month	Day	Year		Month	Day	Year

b) Who disciplines your children?  
 Father  Mother  Both  Other

c) What part does prayer play in your home?  
 Prayer at meals  Devotions  Infrequent prayer  
 Bedtime prayer  Crisis prayer  No prayer

## 5. OTHER DEPENDENTS AND RELATIONSHIPS

Name	Relationship	Age

**6. RESUME**

Please provide on a separate sheet a resume of your life, work, and ministry experience.

**7. EDUCATION**

**a) Secondary Schooling**

NAME	DATE GRADUATED			DIPLOMA
	Month	Day	Year	

**b) Post-secondary Schooling**

NAME	DATE GRADUATED			DIPLOMA
	Month	Day	Year	

**c) Bible College or Seminary**

NAME	DATE GRADUATED			DIPLOMA
	Month	Day	Year	

**d) Diploma in Ministry course is the approved course for The ECCC credentials (available through Waterloo Bible College).**

NAME	DATE GRADUATED			DIPLOMA
	Month	Day	Year	

**Note: Please send copies of transcripts of your Bible College, University, Seminary, Correspondence Course, and/or any other applicable academic studies with your application.**

**e) List major extra-curricular activities during secondary or post-secondary education:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**f) List any class offices held:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. CURRENT CHURCH INVOLVEMENT**

- a) Church or organization: \_\_\_\_\_
- b) Are you on staff?  Yes  No If "yes", what is your position? \_\_\_\_\_  
 Full time  Part time  Volunteer Hours per week in ministry \_\_\_\_\_
- c) Describe your ministry role and function in your current position. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9. EARLY HOME ENVIRONMENT**

- a) Describe the early spiritual influences or events that led to your application for ministry:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- b) Characterize the impact of your home environment, giving examples of how it influenced your life: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- c) Number of siblings: \_\_\_\_\_ Your birth order: \_\_\_\_\_

**10. SPIRITUAL HISTORY**

- a) Describe your life's journey and your passion for ministry. Include incidents you feel were significant in your formation as a person and your call to ministry, personal ideals, goals and salvation experience:  
\_\_\_\_\_  
\_\_\_\_\_  
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**b) What church do you currently attend? Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Which denomination is it affiliated with?** \_\_\_\_\_

**Are you a member?**  Yes  No **How long have you been attending?** \_\_\_\_\_

**Pastor's name:** \_\_\_\_\_ **How many times a week do you attend?** \_\_\_\_\_

**c) What church activities are you involved in?** \_\_\_\_\_

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**d) Which church did you attend *while* in Bible College/Seminary/ University?**

**Name:** \_\_\_\_\_ **How many times a week did you attend?** \_\_\_\_\_

**What activities were you involved in?** \_\_\_\_\_

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**e) Which church did you attend *prior* to Bible College/Seminary/University?**

**Name:** \_\_\_\_\_ **How many times a week did you attend?** \_\_\_\_\_

**What activities were you involved in?** \_\_\_\_\_

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**f) When and where were you baptized in water by immersion according to Matthew 28:19?**

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**11. CALL TO MINISTRY**

Please describe briefly:

a) Your leadership style \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b) Your worship emphasis \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Your ministry, gifts, skills and strengths \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) Your vision for ministry \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**12. FINANCES**

a) Briefly describe your current financial situation, noting whether you tithe and/or give beyond a tithe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b) Please outline your views and experience on personal budgeting and money management: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**13. PREVIOUS APPLICATIONS/CREDENTIALS**

a) Have you ever applied for, or held, ministerial credentials with another organization or denomination?  Yes  No

b) If yes, please give particulars noting type of credential held, and with what organization:

ORGANIZATION	CREDENTIAL HELD	DESCRIPTION OF CREDENTIAL

**14. TRANSFERS FROM OTHER CHURCH ORGANIZATIONS**

*This section is to be completed only by those who are transferring into The ECCC from other organizations.*

a) What grade of credentials do you now hold: \_\_\_\_\_ valid from \_\_\_\_\_ to \_\_\_\_\_  
 If ordained, the date of ordination (M/D/Y) \_\_\_\_\_

b) As required by the General Constitution and By-laws, a copy of your:  
 1. Current Credential Card, AND  
 2. Ordination Certificate (*if applicable*) must be included as part of this application

Are you able to meet this request?  Yes  No

If “no”, please explain: \_\_\_\_\_

c) If you are granted a credential with The ECCC, will you surrender any other credential you may have with another religious organization?  Yes  No

**15. POLICE RECORD CHECK (*must be enclosed*)**

Date Conducted (must be within last 12 months): \_\_\_\_\_

**16. REFERENCES (*must be mailed separately and directly to The ECCC Central Office*)**

It is important that the people listed as references (*no family members*) know you well enough to answer such questions as “How would you describe the applicant’s spiritual maturity?” and “Was the applicant prompt and regular in work attendance?” If you are presently on a ministry staff, one of the ordained minister references must be from the Senior Pastor.

<b>Senior Pastor</b>	Name		
	Street Address		
	City	Province	Postal Code
	Phone	Email	

<b>General Reference</b>	Name		
	Street Address		
	City	Province	Postal Code
	Phone	Email	

<b>General Reference</b>	Name		
	Street Address		
	City	Province	Postal Code
	Phone	Email	

**17. WAIVER**

Recognizing that the information on Credentials Reference Forms remains confidential between the referee and the Credentials Committee of The ECCC, I, the undersigned, hereby voluntarily waive any right or privilege to inspect or challenge the content expressed by those whose names I provide.

I declare that to the best of my knowledge all of the foregoing information is current and true, and further agree to abide by the commitments made in this application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



**4. EVALUATION**

Using the grid below, to the best of your knowledge, evaluate the applicant in the areas listed by circling the appropriate response.

	Poor	Average			Exceptional	Unknown
Leadership Ability	1	2	3	4	5	6
Christian Character/Integrity	1	2	3	4	5	6
Commitment to Christ	1	2	3	4	5	6
Response to Authority	1	2	3	4	5	6
Potential for Ministry	1	2	3	4	5	6
Dependability	1	2	3	4	5	6
Communication Skills	1	2	3	4	5	6
Cooperation	1	2	3	4	5	6
Initiative	1	2	3	4	5	6
Emotional Stability	1	2	3	4	5	6
Acceptance by Peers	1	2	3	4	5	6
Marital/Family Relationships	1	2	3	4	5	6
Overall Evaluation of the Applicant's Suitability for Ministry	1	2	3	4	5	

**5. RECOMMENDATION**

Do you recommend this applicant for ministerial credentials?  Yes  No

Comment if desired \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**6. ADDITIONAL COMMENTS**

Thank you for your valuable input. Please use the space below, or include a separate page for additional comments that might assist us in our assessment of the applicant. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



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Using the grid below, to the best of your knowledge, evaluate the applicant in the areas listed by circling the appropriate response.

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 \_\_\_\_\_  
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\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



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 \_\_\_\_\_

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\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_