



Full Gospel Australia

life for communities

APPLICATION FOR A MINISTRY CREDENTIAL

PO Box 195, CAPALABA QLD 4157 admin@fullgospelaustralia.org.au www.fullgospelaustralia.org

Check which type of Ministry Credential this application applies to:

Ordained Minister Credential Associate Minister Credential Ministry Leader Credential

YOUR PERSONAL DETAILS

First Name _____ Middle Name(s) _____ Last Name _____

Preferred First Name _____ Date of Birth _____ Male Female

Residential Address _____ Nationality _____

City _____ State _____ Postcode _____

Postal Address _____

City _____ State _____ Postcode _____

Home Ph _____ Church Ph _____ Mobile _____

Email _____ Website _____

Marital Status _____ Name of Spouse _____

Emergency Contact Name _____ Mobile _____ Email _____

Emergency Contact details must be different to your own details and must agree to be contactable by FGA .

CHARACTER DETAILS

Have you been previously married? Yes No

Have you ever been bankrupt? Yes No

Have you ever been charged or convicted of a noffence in Australia or a foreign country? Yes No

Are you currently subject to an unresolved complaint, investigation, or charge? Yes No

Are you or have ever been subject to disciplinary action in your employment or ministry? Yes No

Have you ever been refused credentials or ordination by a nyother denomination? Yes No

If YES to any of the above, please provide FULL details in a separate document marked PRIVATE/CONFIDENTIAL

MINISTRY EDUCATION

Institution _____ Qualification _____ Date _____

Institution _____ Qualification _____ Date _____

Institution _____ Qualification _____ Date _____

FGA deems all ministers come into contact with children, so need a current Working with Children Check by their State or Territory Government. Please provide your WWCC or Bluecard details:

Working With Children Check (Bluecard) # _____ Expiry Date _____

OTHER QUALIFICATIONS

Details of your completed post-secondary education (e.g., TAFE, University)?

Institution _____ Qualification _____ Date _____

Institution _____ Qualification _____ Date _____

Institution _____ Qualification _____ Date _____

WORK HISTORY

Are you currently employed? Yes / No

Employer _____ Position _____

Duties _____

Details of previous employment

Employer _____ Position _____

Duties _____

CHRISTIAN EXPERIENCE

When did you become a Christian? _____ Briefly detail your conversion experience _____

Date of water baptism _____ Date of Baptism in the Holy Spirit _____

Describe your call to ministry _____

MINISTRY EXPERIENCE

Please detail your present and previous ministry and/or leadership experience and responsibilities:

Ministry _____ Period _____

Ministry _____ Period _____

Ministry _____ Period _____

Ministry _____ Period _____

If you need more space to detail your ministry experience, please include the details on a separate document.

Please provide details of previous credentials with any other denomination

CHURCH OR MINISTRY DETAILS

Name of your church or ministry _____

Address _____ City _____ State _____ Code _____

Statistical Details: What is your ministry's overall membership? _____ Average Service Attendance _____

Average Prayer Meeting _____ Youth Group _____ Children's Ministry _____ Other _____

Does your ministry have a community outreach program? Yes / No

If so, how many people in your community would be reached by people in your ministry each year? _____

Describe your ministry's mission program _____

Your current responsibility (e.g., Pastor/Elder/Youth Leader/Etc.) _____

STATEMENT OF APPLICANT

1. I hereby apply for the stated Credential with the Full Gospel Churches of Australia and affirm that the information I have given is true and correct.
2. I have read and accept the Statement of Faith (published on our website) of the Full Gospel Churches of Australia and will uphold its values.
3. I will comply with Full Gospel Australia's Safe Ministries Strategy.
4. I give permission for my Church or Ministry details to be published by Full Gospel Australia, should my application be successful.
5. I agree to be contacted by Full Gospel Australia leadership and understand that my contact information may be accessed by other FGA ministers, ministries, and churches.
6. As a minister of the Gospel, I will engage with professional development, continuing my ministry education, according to the guidelines set by Full Gospel Australia .
7. I will attend seminars, conferences, on-line meetings, and webinars held by Full Gospel Australia and will engage with other ministers of the Gospel for mutual support.
8. I will maintain my own spiritual health and a vital relationship with God by regularly reading the Bible, prayer, contemplation, and fellowship with other Christian Leaders.
9. I will abide by Full Gospel Australia's Code of Conduct and continue to be responsible to my local board, elders, responsible people or oversight. I will act in integrity, maintain high moral values and high ethical standards as a role model for others.

Signature _____ Date _____

Full Name of Applicant _____

SUPPORTING DOCUMENTS

1. Each application for an Ordained or Associate Credentials must be accompanied by two supporting references from Ordained Ministers of Religion, on letterhead with contact details, from any Christian denomination. Please ensure that your referee is available for a phone interview, in addition to their written reference.

Reference 1 Attached

Reference 2 Attached

Ministry Leaders Credential applications only require ONE reference from the SENIOR ORDAINED MINISTER of their organisation as their credential rests on the Senior Ordained minister's authority and are directly overseen by them.

2. As direct oversight, employment of and responsibility for a Minister of Religion rests with the local church and not the Full Gospel Churches of Australia , your church or ministry board (or applicable entity such as Elders or other responsible persons) must provide a letter of support verifying the details of this application are true and correct. A proforma for this document is attached and must be printed on your ministry's letterhead before being signed by at least two board members or responsible persons.

3. A photo (Head and Shoulders) is required for our records and any credential card issued.

Photo Attached

4. One Photo Identification Document is required to establish your identity and correct legal name. This document will be deleted/destroyed once your identity has been established.

Photo ID Attached

Please print this application, or save it as a PDF document before submission.

Please forward this application form to admin@fullgospelaustralia.org.au or to P O Box 195, Capalaba Qld 4157.

Application fees of \$59 incl. GST can be paid online using the bank details below (please include the applicant's SURNAME in the reference field and email a copy of your bank receipt). You may also pay by Credit Card via the STORE on the Full Gospel website (<https://www.fullgospelaustralia.org.au/store>).



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FGA Bank Details:

Account Name: Full Gospel Australia
BSB: 034 080 Account : 579 344

Please Note: Applications submitted without the Application Fee will not be accepted.

[Your Letterhead]

We, the undersigned, being responsible persons for **[Insert your Church name]**, do hereby state our full support for **[Applicant's Name]**. We believe he/she is a fit and proper person to exercise leadership within our congregation and we take responsibility as the church's governing board or elders to oversee his/her actions. We wholeheartedly support his/her role as a pastor in our church and to hold the credential he/she has applied for with The Full Gospel Churches of Australia. We confirm the information on their application and/or renewal forms are true and correct. Should any of these details change, we will immediately notify The Full Gospel Churches of Australia.

Signed:..... Name:..... Date:.....

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