



THE RIVER CREDENTIALING APPLICATION

*A \$125.00 fee must accompany your application. *One application per individual*

APPLICANT'S NAME: _____ Date: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: home (____) ____-____ work(____)____-____ cell(____)____-____

EMAIL: _____

PERSONAL

Date of Birth: ____/____/____ Age: _____ Gender: Male Female

Marital Status: Single Married Separated Divorced Widowed (When _____) (If separated or divorced, please attach explanation)

Name of Spouse (if married): _____

Birth date: ____/____/____ Age: _____

Is your spouse in agreement with your ministry? ___Yes ___No

Number of Children: _____

Names of Children: _____

EDUCATION

High School: _____ Years: _____ Diploma? _____

College: _____ Years: _____ Diploma? _____



Bible College: _____ Years: _____ Diploma? _____

Other: _____ Years: _____ Diploma? _____

FAMILY

Briefly describe your relationship with family listed below:

Spouse: _____

Child (name _____): _____

Child (name _____): _____

Your family life (all those living in your household): _____

Your parents: _____

Your spouse's parents: _____



EMPLOYMENT

Present Employer: _____

Address: _____

City: _____ State: _____ ZIP: _____

PHONE: (____)____-_____

Job Title/function: _____

FINANCIAL

Are your bills current? ___Yes ___No
(If no, please attach brief explanation)

Have you ever filed bankruptcy? ___Yes ___No
(If yes, please attach brief explanation)

Are you regularly giving tithes and offerings to your home church? ___Yes ___No (If no, please attach brief explanation)

CHURCH LIFE

What church are you currently attending: _____

Do you attend church regularly? ___Yes ___No

How long? _____ Are you a member? ___Yes ___No

Pastor's Name: _____

Phone: office (____)____-_____ cell (____)____-_____

Church Address: _____



THE RIVER
REVIVAL NETWORK

City: _____ State: _____ ZIP: _____

Who is your mentor at this time? _____

SPIRITUAL

When were you converted to Christ? _____

Have you been immersed in Water Baptism? ____Yes ____No

Have you been baptized in the Holy Spirit? ____Yes ____No

If no, are you seeking it? ____Yes ____No

State any Christian service you have done: _____

Please state your ministry focus/passion: _____

Please state your strengths: _____

Please state your weaknesses: _____

HISTORY



Answering YES to the following questions will not automatically disqualify the applicant from acceptance.

Are you currently dealing with, or have you dealt with addictive behavior? ____ Yes ____ No

If yes, please attach brief explanation:

Have you ever been involved in Homosexuality or Lesbianism? ____ Yes ____ No

If yes, how long since last involved?

Have you ever been involved in pornography? ____ Yes ____ No

If yes, how long since last involved?

Have you ever been involved in an intimate relationship outside of marriage? ____ Yes ____ No

If yes, please attach brief explanation:

Have you ever been arrested? ____ Yes ____ No If yes, when?

If yes, please attach brief explanation

Were you convicted? ____ Yes ____ No ____ N/A

If yes, when and where? _____

If yes, please attach brief explanation:

Have you ever been involved in the occult, witchcraft, or cults? ____ Yes ____ No

If yes, please attach brief explanation:

Agreement: I verify that the information on this application is true and correct. I hereby certify that I have read ***“The River, A Gathering Place”*** Packet including Statement of Purpose, Basic Requirements, Statement of Faith, Levels of Credentialing and Related Requirements, and accept them, and agree to abide by them while credentialed with The River.

Applicant's Signature: _____ **Date:** _____

The River Board reserves the right to require the withdrawal of any member who is considered to be out of harmony with the spirit of this fellowship.



THE RIVER
REVIVAL NETWORK

PLEASE LIST THREE REFERENCES – including one from your Senior Pastor. Also, one of the people listed must be connected to or licensed with The River or Global Legacy. You can request each of them to go to our website and complete the recommendation form. You can also download the Referral Form from our website and hand it to them; this will speed up the process. If you are a Senior Pastor, please include a reference from one of your peers.

REFERRAL #1 NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) ____ - _____ RELATIONSHIP: _____

BUSINESS: _____

REFERRAL #2 NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) ____ - _____ RELATIONSHIP: _____

BUSINESS: _____

REFERRAL #3 NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) ____ - _____ RELATIONSHIP: _____

BUSINESS: _____



*Please attach a small photo of yourself *Don't forget to attach explanations to any questions that require additional comments

***Ministry History and Description Form**

In a typed, double-spaced statement not to exceed 500 words, write a description of the ministry/ministries in which you are currently involved. Include significant activities, the level of your responsibility, and results of activities stated.

Of particular interest, is the history of the past twelve months. Please include information on a type of ministry/ministries, location or venues in which the ministry took place, primary focus of your ministry, and any partnerships in which you have been involved. Also, include whose supervision or direction you were under while participating in this ministry. Please add any other information that you deem significant or necessary to this credentialing application.