

# Liberty Fellowship of Churches & Ministers, Inc.

Please attach  
recent photo  
(high quality and  
reproducible)

## Minister's Application for Licensing/Provisional Ordination/Ordination

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Status of credentials applying for: License \_\_\_\_\_ Provisional \_\_\_\_\_ Ordination \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_  
Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

May we post your information on  
our website in a password -  
protected area? \_\_\_\_\_

Name of Spouse: \_\_\_\_\_

Names/Ages of Children: \_\_\_\_\_  
\_\_\_\_\_

Spouse Date of Birth: \_\_\_\_\_ Anniversary Date: \_\_\_\_\_

Church/Ministry Name and Address: \_\_\_\_\_  
\_\_\_\_\_

Church/Ministry Phone: \_\_\_\_\_

Web Site: \_\_\_\_\_

Which address would you prefer your correspondence to be mailed? Home or Church/Ministry

Position(s) held at above Church/Ministry: \_\_\_\_\_  
\_\_\_\_\_

This position is: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Volunteer \_\_\_\_\_

Date of: Salvation \_\_\_\_\_ Holy Spirit Baptism \_\_\_\_\_

Evidence of Tongues? Yes or No

What is your denominational background? \_\_\_\_\_

Have you been ordained before? Yes or No

If so, by whom? \_\_\_\_\_

With whom are you presently affiliated? \_\_\_\_\_

Name of immediate overseer? \_\_\_\_\_

Please list your ministry experience: \_\_\_\_\_

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

What do you feel are your ministry gifts and calling?

Apostle \_\_\_\_\_ Evangelist \_\_\_\_\_ Exhorter \_\_\_\_\_ Missionary \_\_\_\_\_

Pastor \_\_\_\_\_ Teacher \_\_\_\_\_ Prophet \_\_\_\_\_ Other: \_\_\_\_\_

What are your immediate plans for ministry? \_\_\_\_\_

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

Education: College/Bible School

Degree/Diploma

Date

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

If you do not have Bible training, are you willing to pursue Bible training? Yes or No

If yes, please contact the Liberty Fellowship office for a list of college/correspondent schools.

Please describe why you desire to have credentials with Liberty Fellowship: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list five references - four of former churches, prayer groups or pastors and one current Liberty Fellowship member. Please include address and phone numbers for each.

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

If you are divorced, please explain the circumstances which brought it about: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are remarried, for how long? \_\_\_\_\_ Please explain circumstances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you been baptized by immersion? \_\_\_\_\_

Do you use tobacco in any form? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Do you: a) Abstain from drinking alcohol \_\_\_\_\_

b) Commit to use alcohol in moderation \_\_\_\_\_

Will you conduct yourself wisely toward the opposite sex as becomes a servant of the Lord? \_\_\_\_\_

Do you accept the church government as practiced by Liberty churches? \_\_\_\_\_

Will you be loyal to those who are over you in the Lord? \_\_\_\_\_

Will you do your utmost to promote peace in the Liberty family? \_\_\_\_\_

If at any time you believe that you cannot, or will not, conduct your life according to the terms set forth by the Fellowship, will you willingly and peacefully withdraw from the Fellowship? \_\_\_\_\_

If at any time the officers of the Fellowship believe that your conduct of life is in error, will you willingly appear before them upon their request? \_\_\_\_\_

The Fellowship is financially supported by credential based fees and love offerings within the membership. In order to defray the expenses of the Fellowship, would you be willing to support the Fellowship with the established monthly fee? \_\_\_\_\_ Please review the financial contribution guidelines online or request one from the office.

There is a NON-refundable application fee of \$115.00 which is to be paid at the time of application submission. There is also a renewal fee of \$100.00 per year to help pay for secretarial duties and materials in reference to the above business. The fiscal year begins on September 1 and ends August 31. Please make all checks payable to Liberty Fellowship. Mail application to Liberty Fellowship, 4101 W Green Oaks #305-242, Arlington, Texas, 76016.

I have read and do agree to abide by the statement of faith and the terms set forth in the charter of Liberty Fellowship of Churches & Ministers, Inc.

I understand that the Liberty Fellowship of Churches & Ministers, Inc., reserves the right to deny, revoke or withhold ministerial credentials.

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

I have submitted my information for a background check with Protect My Ministry by including a signed, completed authorization with this application. \_\_\_\_\_ (Please initial). Go to [www.libertyfellowship.org](http://www.libertyfellowship.org), under the Members tab, choose an option under the Protect My Ministry heading.

**Please include the following with this application:**

- 1. A short testimony of your salvation, baptism of the Holy Spirit and other pertinent information related to your call and ministry.**
- 2. A letter of recommendation from a Liberty Fellowship District Overseer.**
- 3. \$115.00 non-refundable application fee.**
- 4. A recent, high quality, reproducible photograph.**
- 5. A signed authorization for background check if one was not submitted online.**

**Liberty Fellowship 4101 W Green Oaks #305-242 Arlington, TX 76016**  
**(phone) 817-677-1350 (e-mail) [libertyfellowshipoffice@gmail.com](mailto:libertyfellowshipoffice@gmail.com) (website) [www.libertyfellowship.org](http://www.libertyfellowship.org)**