



APPLICATION FOR MEMBERSHIP

World Harvest Church Ministerial Fellowship

WHC MINISTERIAL FELLOWSHIP MEMBERSHIP REQUIREMENTS

This document provides the requirements that must be fulfilled in order for a minister to be considered for membership approval in World Harvest Church Ministerial Fellowship (WHCMF). As our name states, we are a fellowship, and not a denomination. Therefore, the information requested is not intended to establish the overseeing or governing of a church or ministry. These requirements are set forth for the purpose of upholding the standards and integrity of WHCMF.

WHCMF has three areas of membership:

General Membership – Available to a minister that currently holds ordination credentials with another organization or denomination and is applying for membership to come under the covering of WHCMF. \$150.00 annual fee.

License Membership – Available to a minister who is in **part-time ministry** and whose ministerial calling and gifts are formally recognized by the World Harvest Church Ministerial Fellowship. \$150.00 licensing fee, plus \$150.00 annual fee.

Ordination Membership – Available to a minister who is currently in **full-time ministry**, has not received his/her credentials, and desires to apply for ordination through the World Harvest Church Ministerial Fellowship. **A full-time minister is defined as one who makes his/her living solely through working in ministry.** \$150.00 one-time ordination fee, plus \$150.00 annual fee.

Membership Requirements:

- Completed and signed application
- Passport-sized photo of applicant
- Provide the following recommendations:
 1. **Ministry Recommendation***: To be completed by your pastor or a credentialed minister that has known you for three or more years.
 2. **Personal Recommendation***: To be completed by a friend or acquaintance who has known you for three or more years.
- Signed Statement of Ethical Conduct
- Ministry Statement (example enclosed)
- Copy of current Ordination or License Certificate, if applicable

WHCMF Approval Process:

- The applicant is responsible for making sure that all components of his/her application arrive at the WHCMF office in a timely manner.
- Review of the application will not begin until all components of the application are received by the WHCMF office.
- After the WHCMF office receives all components of the application, please allow 4-6 weeks to complete the review process and receive your membership papers.
- All Membership requirements must be submitted to and approved by the WHCMF office before anyone can become a member of the WHCMF.

PLEASE TYPE or PRINT CLEARLY. If a question does not apply, type or print "N/A".

PERSONAL DATA

Mr./Mrs./Ms. _____
Name (last) (first) (middle)

_____ Apt. _____
Present Address

_____ City State Zip

(____)____-____ (____)____-____ (____)____-____
Home Phone Cell Phone Fax

_____ E-mail Address

PLEASE
ATTACH
CURRENT
PHOTO
HERE

(Required)
(Head and shoulders only)

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

U.S. Citizen: Yes No If no, Country of Citizenship: _____
(If permanent resident alien, please enclose copy of green card.)

Marital Status: Single Married Separated* Are you or have you been divorced?*

* Please give thorough and complete details, including number of times, on separate sheet of paper. (REQUIRED)

SPOUSE/FIANCÉ DATA (IF APPLICABLE)

_____ Name (last) (first) (middle)

Date of Birth: ____/____/____ Date of marriage: ____/____/____

Is your spouse or fiancé saved? Yes No

Is your spouse or fiancé filled with the Holy Spirit with the evidence of speaking in tongues? Yes No

Is your spouse or fiancé in full support of your call to ministry? Yes No

If not, why? _____

EDUCATIONAL HISTORY

(Circle highest level attained)

1 2 3 4 5 6 7 8 9 10 11 12 GED Vocational/Technical 1 2

College: 1 2 3 4 Bible School Associate Bachelor Master's Specialist Doctorate

List all higher educational institutions attended and degree earned.

Name of School Dates Major Diploma/Degree

MINISTRY INVOLVEMENT

Are you currently involved in full time ministry? Yes No If yes, how many years? _____

Current Ministry Position: Sr. Pastor Assoc. Pastor Youth Children Music Other

If Other, please provide detail. _____

Are you presently or have you ever been licensed or ordained? Yes No

If so, please list the denomination/organization and date credentialed. *(Please attach a copy of credentials)*

If you are leaving or have left this denomination/organization, please explain why:

CHURCH AFFILIATION

List the name of the church which you currently pastor or attend.

_____ (____) _____ - _____
Name of Church Senior Pastor Phone

Street Address

City State Zip

How many members attend the church? _____

How long have you pastored or attended this church? _____

If less than one year, list the name of the church you formerly attended, including pastor's name, address and phone number. Also, list how long you attended and your reason for leaving.

Have you previously submitted an application to WHCMF? Yes No

If so, when? _____

YOUR SPIRITUAL PILGRIMAGE

Date you were saved: ____/____/____ Were you raised in a Christian home? Yes No

Date you were baptized by immersion: ____/____/____

Date you were baptized with the Holy Spirit with evidence of speaking in tongues: ____/____/____

Understanding that a minister of the Gospel must maintain the highest moral and ethical standards; do you feel there is any area of your personal life that would hinder your ministry at this time?

Yes No If yes, please explain: _____

Do you currently use tobacco, alcohol or illegal drugs? Yes No
If so, please explain on a separate sheet.

Are you familiar with the ministry of Pastor Rod Parsley? Yes No

Have you read any of his books, listened to his CDs, or watched his DVDs? Yes No

STATEMENT OF TRUTH

I understand that all items submitted to WHCMF as part of the application process become the permanent property of WHCMF and will not be returned.

This application will be held in confidence. Only those persons with a need to know will review it. I grant WHCMF and its leadership permission to verify the information provided on this application and all membership requirements.

I hereby state that all the information contained on this application and all correspondence with WHCMF is correct and true. If WHCMF is notified that any of the information contained on this application is false, it will be grounds for immediate cancellation of application procedure and/or revocation.

Signature

Date



METHOD OF PAYMENT

- General Membership \$150.00**
- Licensing \$300.00**
- Ordination \$300.00**

Check method of payment:

(Please make Money Order or Check payable to World Harvest Church and attach to this application.)

AMEX MasterCard Visa Discover Money Order Check

Card Number _____-_____-_____-_____

Amount \$ _____ Expiration Date _____-_____-_____

Signature



P.O. Box 316 • Columbus, OH 43216-0316 • (614) 382-1133 • Fax: (614) 834-2242
whcmf@RodParsley.com • www.whcmf.net



PERSONAL RECOMMENDATION

Applicant, please give personal recommendation to someone that has known you for three or more years, but is not a relative.

Name of Applicant: _____

Address: _____ Apt. _____

City: _____ State: _____ Zip: _____

Name of Church or Ministry: _____

Your name has been given as a reference for the above named person for membership into World Harvest Church Ministerial Fellowship. Serious consideration will be given to your comments; therefore, we ask that you carefully complete this form.

Please fill out the form and return it directly to the WHCMF office. Please be assured that your comments will be held in strict confidence.

- (1) How long have you known the applicant? ____years ____months
- (2) Do you feel that you know the applicant well enough to evaluate his/her eligibility for ministerial credentials? Yes No
- (3) What is your relationship to the applicant? Friend Pastor Other
 Casual Close Professional
- (4) How well do you know him/her? (Check one)
 Casually / few personal contacts Fairly well / numerous personal contacts
 Mentoring relationship Very close ministry relationship

Comments: _____

- (5) In your opinion, does the applicant exhibit a call to the ministry?
 Yes No Do not know

Explain your answer: _____

(6) To your knowledge is the applicant currently involved in active ministry? Yes No Do not know

(7) Pulpit experience / preaching and teaching:
 Well experienced Light experience
 No experience Do not know

(8) Work habits (in the ministry):
 Very industrious Satisfactory
(does more than required)
 Does enough to get by Does less than expected
 Do not know

(9) Stability / ability to withstand pressure: *(check all that apply)*
 Tolerates pressure well Average tolerance/usually remains calm
 Easily irritated Cannot handle pressure
 Do not know

(10) Personal organization:
 Conscientious, tidy, clean Fairly neat
 Tends to be disorderly Disorderly and untidy
 Do not know

(11) Response / attitude toward authority:
 Helpful and cooperative Usually responsive
 Resentful of authority Not cooperative / very resentful of authority
 Do not know

(12) Marriage and family:
 Attentive to spouse/children Spouse/children take a back seat to work and ministry
 Neglects spouse/children Do not know

(13) Emotional stability:
 Self-controlled and mature Usually stable
 Moody and changeable Many uncontrolled periods/unstable

(14) Please give your knowledge of the applicant's involvement in church activities (check one).
 Attends irregularly/shows little interest Cooperative, usually willing to help
 Seldom participates, but attends regularly Enthusiastic and is deeply involved

Comments: _____

(15) To your knowledge is the applicant currently involved in any heresy? Yes No

If yes, explain: _____

(16) Having observed this person in the ministry, would you:

- Highly recommend Recommend Recommend with reservations

Please list your reservations: _____

(17) To aid us in our decision making, please give us your personal comments on the integrity of the applicant:

(18) List what you consider to be the applicant's strong points:

(19) List what you consider to be the applicant's weak points.

(20) Please indicate below your rating /status of the applicant:

	<u>Above</u> <u>Average</u>	<u>Average</u>	<u>Below</u> <u>Average</u>	<u>No chance</u> <u>to observe</u>
Leadership	_____	_____	_____	_____
Responsibility	_____	_____	_____	_____
Christian Commitment	_____	_____	_____	_____
Moral Character	_____	_____	_____	_____
Integrity /Honesty	_____	_____	_____	_____
Emotional Stability	_____	_____	_____	_____
Personal Appearance	_____	_____	_____	_____

(21) Does the applicant have any personality traits which impair his/her relationship with others? _____

(22) Please share with us any information you may know about the applicant that would help in our evaluation for membership. Specific incidents or an overall personality appraisal may be given:

I recommend the applicant for credentials: Yes Yes, with reservation No

Signature: _____ Date: _____

Your Age: 18-25 26-35 36-50 over 50

Address: _____ Apt. _____

City: _____ State: _____ Zip: _____

Phone: Home(_____)_____-_____- Work(_____)_____-_____-

If you are a credentialed minister, please complete the following:

Ministry Name: _____

Your Position: _____

Organization you are credentialed with: _____

Number of years you've held credentials: _____

Additional comments:

**Both recommendation forms should be sent directly to the World Harvest Church Ministerial Fellowship office in the postage-paid return envelopes provided. These forms are confidential and should be returned by the person completing the form via U.S. mail or faxed to (614) 834-2242. (Originals will need to be mailed, even if faxed.) Recommendations will not be accepted if received with an application.*

Thank you for your time and assistance!



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- Very industrious *(does more than required)* Satisfactory
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(20) Please indicate below your rating /status of the applicant:

	<u>Above Average</u>	<u>Average</u>	<u>Below Average</u>	<u>No chance to observe</u>
Leadership	_____	_____	_____	_____
Responsibility	_____	_____	_____	_____
Christian Commitment	_____	_____	_____	_____
Moral Character	_____	_____	_____	_____
Integrity /Honesty	_____	_____	_____	_____
Emotional Stability	_____	_____	_____	_____
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STATEMENT OF ETHICAL CONDUCT

Members of the World Harvest Church Ministerial Fellowship are expected to demonstrate Biblical and ethical standards in their personal lives. Toward this end, it is mandatory that members of the Fellowship agree to be held accountable and to pursue a life of holiness as outlined below:

- Live a life in the Holy Spirit and the requirements of the Scriptures regarding ethics, integrity, and moral purity.
- Maintain a life of sexual integrity.
- Live a life of marital fidelity as outlined in the Scriptures.
- Walk in integrity and model financial accountability in ministry and personal affairs.
- In every area of life, abstaining from anything that might be improper, or give the suggestion of impropriety, so as to remain above reproach and not cause the brethren to stumble.

Membership in WHCMF will be withheld from applicants or revoked from members failing to exhibit these characteristics, and/or modeling a lifestyle outside of these guidelines.

Signature

Date

