



American Evangelistic Association

APPLICATION FOR AEA CREDENTIALS

Applicants please complete this form and send to the attention of the CREDENTIALS COMMITTEE
American Evangelistic Association
PO Box 121000 · Melbourne, FL 32912-1000

Every entry must be filled. If not applicable, state why. You must send two passport size photos with this application and place your thumbprints in the designated areas.

The information you provide here will be held confidential and will be available only to American Evangelistic Association and its agents in matters relating to your AEA application and membership.

APPLICANT'S NAME _____
Last First Middle Initial

DATE OF BIRTH _____ MALE FEMALE

SOCIAL SECURITY NUMBER _____

DRIVER'S LICENSE NUMBER _____ STATE _____

RESIDENCE ADDRESS _____

CITY _____ STATE _____ ZIP + 4 _____

HOME PHONE () - _____ WORK PHONE () - _____

FAX () - _____ E-MAIL _____

NATIONALITY _____ CITIZENSHIP _____

PASSPORT NUMBER _____ NATION _____

ENCLOSED is my required:

- \$55.00 One time Application Fee
- \$40.00 Annual renewal fee

Annual Fees help cover the expense of maintaining the AEA office and its official registry of all ordained ministers and missionaries, licensed preachers and Christian workers and to verify their credentials and standing upon inquiry from officials and churches.

- It is understood**, with membership, I will support my association with a minimum \$30.00 a month or more of my tithes and offerings faithfully.
- Our Local congregation/fellowship is interested in being Chartered by the AEA. Please send me full information.
- I am interested in becoming an AEA Christian Worker. Please send me full information.

You may pay by Check or Credit Card. Make checks payable to: American Evangelistic Association, PO Box 121000, Melbourne, FL 32912. For Credit Card payment details, you may call the office at: **1-888-526-3751**. Credit Card & PayPal is also available on our website: www.AEAMinistries.org

OFFICE USE ONLY
Date this Application received: _____

Family's Vital Statistics of Those Applying

Applicant's Marital Status Married Single Divorced Remarried Widowed Separated • If divorced or separated please attach a summary explanation.

Full Name of Spouse _____ Birth Date _____

Date of Marriage _____ Place of Marriage _____ Name of Officiating Pastor _____

Nationality of Spouse _____ Citizenship _____

Number of Children _____

This application is to become a candidate for certification as a:

My Calling: Ordained Minister Licensed Minister Christian Worker Other _____

Agreement: As one called of God, I believe, to minister the Gospel, I do wholeheartedly subscribe to the Doctrinal Statement of the American Evangelistic Association and its Code of Ethics and will abide by them with God's help.

Signature _____ Date _____

Christian Testimony and Service

When and for what work were you called? (Please continue on a separate page) _____

Tell us how you came to a meaningful relationship with the Lord (Please continue on a separate page) _____

Names and addresses of three pastors or lay leaders who can verify your Christian character, testimony, calling and service and is recommending you to AEA:

1 _____ Phone _____ Email _____

2 _____ Phone _____ Email _____

3 _____ Phone _____ Email _____

How long have they known you? 1.) _____ 2.) _____ 3.) _____

When converted? _____

Date of Water Baptism _____ Place of Baptism _____ When baptized in Holy Spirit? _____

Name and Address of Your "Home" Church _____

Telephone number of your home church _____ Name of the present Senior Pastor _____

Continue on Back

Personal History

Have you ever been indicted, arrested, or convicted of a crime? Yes No

If yes, please give a full explanation _____

Have you ever been charged with, accused of, investigated for, censured for, moved because of, or transferred to another position because of sexual misconduct or sexual harassment? Yes No

Do you use tobacco? _____ Liquor? _____ Narcotics? _____

Education/Training

List any formal education you have received including all schooling, seminar participations, course work completed and degrees awarded:

High School _____ Years _____ Degree _____

College _____ Years _____ Degree _____

Seminary _____ Years _____ Degree _____

Graduate Schools 1) _____ Years _____ Degree _____

2) _____ 3) _____

Seminars _____

Other: _____

Have you ever had a Ministerial License Ordination? If so, with whom: _____

Give reason for change: _____

Experience

Give details of previous ministerial experience. _____

Have you served as church pastor? Yes No Place _____

Dates of service _____ to _____

How are you supported financially? _____

Other Positions _____

Do you have a ministry? Yes No If yes, please define your ministry: _____

Is your ministry incorporated? Yes No Name: _____ If no, proposed name: _____

Does your ministry have a 501(c)3 designation? Yes No If not, do you plan to apply for one? Yes No

How will you use your AEA credentials if accepted? _____

How did you hear about AEA (American Evangelistic Association)? _____

I, _____, acknowledge and affirm that the information provided by me in this Application, including all attachments and exhibits, is true and correct to the best of my knowledge. I understand that if I am granted general membership and receive credentials of any kind from American Evangelistic Association (AEA), that my membership and credentials may be withdrawn or terminated by AEA at any time and without notice, if any information is found to be false or misleading.

I hereby authorize AEA and anyone they so designate, to conduct a complete investigation of my background, character, reputation, and fitness, before granting me general membership in AEA or affording me any credentials or certifications.

This application shall constitute authority to all of my past and present employers, to all educational institutions I have attended, to all religious institutions and other organizations to which I have been associated, to all government entities (including criminal records), and to any other person or entity having information about me, to fully disclose such information to AEA. Such information may include, but not be limited to, personal profiles and records, transcripts, earned degrees, professional licenses, attendance and discipline records, complaints, suspensions, license revocations, or fines, and such other oral or written information which at the exclusive discretion of AEA may be relevant to determining my suitability for general membership and/or credentials of any kind.

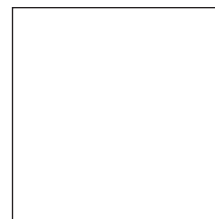
I hereby release any of my present or past employers, educational or religious institutions, government entities, from any claim or liability of any kind for complying with requests for information by AEA. I also release AEA and any AEA designated entity or persons conducting the investigation, from any claim or liability of any kind.

I authorize the making and retention of photocopies or facsimiles of all such information and request that photocopies and facsimile copies be accepted on the same basis as the original.

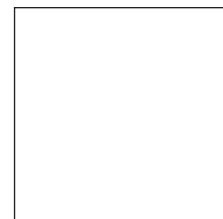
Signature of Ministerial Candidate

Date

LEFT
THUMB
PRINT



RIGHT
THUMB
PRINT





American Evangelistic Association
PO Box 121000 • Melbourne, FL 32912-1000
1-888-526-3751 www.AEAMinistries.org

The Application Process

The Credentials Committee evaluates all candidates for AEA credentials.

AEA's Credentials Committee receives applications, contacts all references, and in some instances contacts references of references. Evaluation is then made as to work and learning experiences, as well as service in aspects of Christian ministry. The candidate is interviewed by one or more of the committee. The committee's conclusion is then given to the candidate.

Steps for completion of the application process:

- 1. Complete the accompanying Application Form OR go to www.AEAMinistries.org, AEA Application, print it and fill it in completely.
2. Attach 2 passport-photographs.
3. A copy of your passport, if you have one OR photo ID.
4. Thumb prints should be done at the designated place.
5. Sign and date the AEA Agreement to Statement of Faith, and Code of Ethics.
6. Initial that you understand AEA's Fees and support.
7. Enclose any addition pages and /or copies of documents you may want to include.
8. Enclose your application fee. Payment can be made by check or credit card. See below.

Member Application Fee: \$55.00 one time application fee
Monthly support of \$30.00 minimum or more
Annual Renewal Fee will be: \$40.00 a year
Affiliation Fee: \$55.00 one time application fee
Monthly support \$30.00 a month or 1% of Ministry's gross income; whichever is greater.
Annual Renewal Fee will be: \$30.00 a year
Christian Worker Fee: \$45.00 one time application fee
Annual Renewal Fee will be: \$30.00 a year + Support

- 9. Mail the above to: American Evangelistic Association, Credentials Committee, PO Box 121000, Melbourne, Florida 32912-1000
Expect 3-4 weeks for a decision. You will be notified by mail.

Payment Options

You may pay the Application fee by Check or Credit Card

Make Checks Payable and Mail to:

AEA (American Evangelistic Association), PO Box 121000, W. Melbourne, FL 32912-1000

To Pay by Credit Card

Credit Card: [] VISA [] MASTERCARD [] AMERICAN EXPRESS

Card number / Expiration Date 3 digit # from back of card

Amount to be charged: \$ [] AEA is authorized to charge to my credit card the amount indicated above. Print Name - Exactly as printed on your Credit Card

Signature Required / Date

Billing Address / Phone

City State Zip Code / Email

AUTOMATIC DEDUCTION PROGRAM

For your convenience you may choose to have your support deducted automatically every month. To register for the automatic deduction program, please complete the information below:

- [] On my acceptance as as an AEA member, please deduct my monthly support of \$ [] from my credit card listed above on the 15th day of each month.

Authorized Signature Required / Date

AEA ETHICAL STANDARDS

I will:

- Maintain high standards of moral, financial and business integrity in all my life and ministries in order that the work of the Lord not be blamed.
- Actively pursue relationships and fellowship with the other ministries and churches within my locality, state, and nation, in accordance with the commands of Holy Scripture.
- Maintain a teachable spirit, and a willingness to learn from other leaders in the Fellowship.
- Have no part, directly or indirectly, with a church split.
- Support and give my loyalty to any Ministering Elder under whom I serve. If I cannot provide this commitment of support and loyalty, I will advise the Elder of that fact stating my reason(s) in a Christ-like manner and withdraw from the Fellowship and seek to affiliate with another in which I can join in good conscience.
- Follow the process as commanded in the Scriptures: (Matthew 18:15-20 and I Cor. 6:1-8) when faced with a brother or sister in violation of this code or other biblical or moral standards. Matthew 18:15-20. "Moreover if thy brother shall trespass against thee, go and tell him his fault between thee and him alone: if he shall hear thee, thou hast gained thy brother."

Matt. 18:16-20 "But if he will not hear, take with you one or two more, that 'by the mouth of two or three witnesses every word may be established'. And if he refuses to hear them, tell it to the church. But if he refuses even to hear the church, let him be to you like a heathen and a tax collector. Assuredly, I say to you, whatever you bind on earth will be bound in heaven, and whatever you loose on earth will be loosed in heaven. Again I say to you that if two of you agree on earth concerning anything that they ask, it will be done for them by My Father in heaven. For where two or three are gathered together in My name, I am there in the midst of them."

- Adhere to the Constitution By-Laws and covenant agreements of the Association.

Signature _____ Witness _____

Date _____



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