

**MIGUEL ANGELO GALLEGOS**  
Senior Church Planter

[angelo@thechurchplanter.com](mailto:angelo@thechurchplanter.com)

**TheCHURCHPlanter**  
[thechurchplanter.com](http://thechurchplanter.com)

217-2386 Haines Road  
Mississauga, ON L4Y 1Y6  
**9052734442**



**Applications for Ministerial Credentials**  
**For Church Planting Pastors and Staff**

## A. General Information

1. All applicants should have -
  - a) a definite call, confirmed by the witness of the Holy Spirit.
  - b) an understanding of, and faith in the purpose of God through your call.
  - c) a desire and dedication to give yourself wholly to the ministry.
2. All parts of this application must be completed entirely.
3. Separate sheets appended to this application shall be with the full name of the applicant and statements given shall be identified by the number of the question(s) being answered.
4. Photo. (Digital Photo)
5. Police Report.
6. The non-refundable application fee of \$25.00 must be included with this Application.
7. Signed Code of Ethics.
8. COSTS: Please note that the yearly fees for those involved with Gilgal Christian Community, Gilgal Missional Community Church, or Gilgal Family of Ministries includes the cost of the annual conference, but that those from out-of-town are not charged.

Organizational	Type of Credential	Fee with Conference	Out of Town
Application Fee	For all Credentials	25.00	25.00
Application Fee	Pastor Emeritus or Single Parent	0.00	0.00
Gilgal Christian Community, Gilgal Missional Community Church, Gilgal Family of Ministries	Spiritual Care Worker Lay-Pastor Licensed Pastor	50.00	25.00
GCC, GMC, GFM	Pastor Emeritus Single Parent	0.00	0.00
GCC, GMC, GFM	Ordained	75.00	50.00
Independent (Non Gilgal)	Spiritual Care Worker Lay-Pastor Licensed Pastor	100.00	100.00
Independent (Non Gilgal)	Ordained Pastor	125.00	100.00

Credential renewals may be for either one or two years as chosen by holder. Yearly payment is due by December 31. Credentials which are not renewed will be deemed to be lapsed after three months (March 31<sup>st</sup> of renewal year).

## B. Ministerial Credentials Requested (All credentials are “staff” credentials, meaning that you serve in a ministry setting or location by appointment of the President who occupies the status of Senior Pastor.)

\_\_\_ Spiritual Care Worker

\_\_\_ Lay-Pastor

\_\_\_ Licensed Pastor

\_\_\_ Ordained Pastor

\_\_\_ Pastor Emeritus

\_\_\_ National License Pastor

## A. General Information

1. All applicants should have -
  - a) a definite call, confirmed by the witness of the Holy Spirit.
  - b) an understanding of, and faith in the purpose of God through your call.
  - c) a desire and dedication to give yourself wholly to the ministry.
2. All parts of this application must be completed entirely.
3. Separate sheets appended to this application shall be with the full name of the applicant and statements given shall be identified by the number of the question(s) being answered.
4. Photo.
5. Police Report.
6. The non-refundable application fee of \$25.00 must be included with this Application.

**B. Ministerial Credentials Requested (All credentials are “staff” credentials, meaning that you serve in a ministry setting or location by appointment of the President who occupies the status of Senior Pastor.)**

<input type="checkbox"/> Spiritual Care Worker	<input type="checkbox"/> Lay-Pastor
<input type="checkbox"/> Licensed Pastor	<input type="checkbox"/> Ordained Pastor
<input type="checkbox"/> Pastor Emeritus	<input type="checkbox"/> National License Pastor

## C. Personal Information

Full Legal Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone - Home: ( ) \_\_\_\_\_ Office: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Permanent Address (if different from current):

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

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Citizenship \_\_\_\_\_ Immigration Status: \_\_\_\_\_

## D. Marital Information

\_\_\_\_ Single      \_\_\_\_ Married      \_\_\_\_ Divorced      \_\_\_\_ Separated

\_\_\_\_ Remarried. Please specify: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Children -

Name _____	Age _____
Name _____	Age _____
Name _____	Age _____
Name _____	Age _____
Name _____	Age _____
Name _____	Age _____

## E. Educational Information

List your secular education.

High School \_\_\_\_\_ Years \_\_\_\_\_

College \_\_\_\_\_ Years \_\_\_\_\_

Degrees, Diplomas or additional training \_\_\_\_\_

List your Bible Education

School \_\_\_\_\_ Years \_\_\_\_\_

College \_\_\_\_\_ Years \_\_\_\_\_

Other \_\_\_\_\_ Years \_\_\_\_\_

Present Occupation \_\_\_\_\_

## F. Christian Experience

1. Are you born again in accordance with John 3:3,5 & 7 When? \_\_\_\_\_



2. Are you baptized in Water? \_\_\_\_\_
3. Do you presently hold ministerial credentials with any other church body or fellowship? \_\_\_\_\_
- a. Type of credentials \_\_\_\_\_
- b. Held with what group \_\_\_\_\_
- c. Mailing address \_\_\_\_\_
- d. Do you wish to retain these credentials \_\_\_\_\_
- e. Date of Ordination – or initial issue of credentials \_\_\_\_\_

3. Have you previously held ministerial credentials which are now invalid? \_\_\_\_\_ If yes, give date: \_\_\_\_\_ issued, name and address of credentialing body,

\_\_\_\_\_

\_\_\_\_\_

and explain the reason(s) why the credentials have lapsed.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Have you ever had your credentials revoked? \_\_\_\_\_ If so, explain in detail on a separate sheet.

5. Have you ever been involved in a church split? \_\_\_\_\_ If so, explain in detail on a separate sheet, noting your involvement in the split and any restorative efforts.

## **G.Ministry Experience**

1. List, with dates and places, past Christian ministry in which you have been engaged.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. What Christian ministry are you now engaged in and where?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Do you have call to any specific line of Christian ministry? \_\_\_\_\_ If yes, what?

---

---

---

---

4. Do you presently have a pastor and attend a local Church or Fellowship? \_\_\_\_\_ If yes, provide the name of pastor, church name and address

---

---

---

(Your pastor will be your first reference – see section J-1)

Is your pastor a relative? \_\_\_\_\_

5. Are you a pastor? \_\_\_\_\_

## **H. Information Concerning Gilgal Christian Community**

1. Have you carefully read the Statement of Faith and Policies of Gilgal Christian Community?

\_\_\_\_\_

2. Are you prepared to abide by the Statement of Faith and Policies of Gilgal Christian Community? \_\_\_\_\_

3. What is your reason for applying for credentials with Gilgal Christian Community?

---

---

---

4. How did you come to know Gilgal Christian Community?

---

---

---

5. If you are granted credentials by GCC, will you at all times respect the sincere convictions of your fellow ministers and fellow Christians, rendering due Christian courtesy in regard to any doctrines or ethics on which you do not agree? \_\_\_\_\_

(If you wish to expand your reply to this item, use a separate sheet.)

6. Do you agree with our Statement of Faith?

\_\_\_\_\_

7. Are you willing to discuss any point of the Statement of Faith with which you have some question in a meeting with the Credentials Committee?

\_\_\_\_\_

8. Will you do your best to participate in times of fellowship with GCC? \_\_\_\_\_

9. Do you agree that as a Credential holder with Gilgal Christian Community, you will not pursue legal action or sue the Corporation and/or its' Executive or Committee members in matters concerning their official duties or in disciplinary action necessary as stated in the Bylaws and Policies of GCC? \_\_\_\_\_

Further, do you agree not to pursue legal action or sue the Corporation and/or its' Executive if you are disqualified from holding credentials according to the Bylaws and Policies of GCC?  
\_\_\_\_\_

### **I. Reference**

List the name, address and telephone number for four people (including your current pastor/sponsor) who will complete and submit a reference sheet on your behalf. They must have known you for at least four years.

Name Address Telephone Number

1. \_\_\_\_\_ ( ) \_\_\_\_\_
2. \_\_\_\_\_ ( ) \_\_\_\_\_
3. \_\_\_\_\_ ( ) \_\_\_\_\_
4. \_\_\_\_\_ ( ) \_\_\_\_\_

### **J. Spouse's Comments**

1. Is there any disagreement concerning this application?  
\_\_\_\_\_

2. Please explain how you feel you relate to your spouse's ministry  
(Use a separate sheet)

3. Do you have any personal reservations about relating to GCC?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Spouse

### **K. Interview**

Each applicant is requested to appear before the Credentials Committee for an interview. You will be notified of a time and place upon receipt of all paper work regarding your application.

## **L. Finances**

My non-refundable Application Fee of \$25.00 is enclosed. Due to the time needed to obtain references, approximately 30 days will be necessary for complete processing. The most frequent source of delay is the receiving of the completed Reference Sheets. If you will advise those you have listed to remit their completed Reference Sheet as soon as possible, it will greatly reduce the time spent in processing. Upon approval of your application, the annual credential fee will be payable. Your Ministerial License will be sent upon receipt of your payment.

---

Applicant's Signature

---

Date