



Credential Transfer Application

Full Name (no initials): _____ Date of Application _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Date of Birth: ____/____/____ Email: _____

MARITAL STATUS

Single ____ Married ____ Name of Spouse if Applicable _____

CRAFTSMANSHIP

Do you have a specific burden in any of the following areas? (Check all that apply)

Children's Church ____ Youth ____ Music ____ Visual Arts (Drama, Dance, Tambourine, Banners etc.) ____ Administration ____

Audio/Video ____ Missions ____ Helps ____ Prophetic Art ____ Healing ____ Counseling ____ Other ____

CURRENT MINISTERIAL INVOLVEMENT

Check appropriate box:

Apostolic ____ Prophetic ____ Evangelistic ____ Pastoral ____ Teaching ____ Music ____ Youth ____ Other ____ None ____

Please give name and address of church:

Name of Church _____

Address: _____

In Keeping with Ephesians Chapter Four, what do you consider your given MINISTRY to be?

Apostolic ____ Prophetic ____ Evangelistic ____ Pastoral ____ Teaching ____

WHAT ORGANIZATION ARE YOU TRANSFERING FROM?

Name of Organization You Are Transferring From _____

Address of Organization _____

Are you leaving in good standing? Yes ____ No ____ If No, Please Explain (If more room needed please attach) _____

Please attach a copy of your Current Credential Card Issued by Organization you are transferring from.

SPONSOR INFORMATION

Sponsoring Member _____ Date _____

Address _____ City _____ State _____ Zip _____

Country _____ Email _____

Please include (as an attachment) a brief description of why you would like to become a member, what your goals are in being a member, and any education and training you would like us to consider.

By signing this application, I agree with the "Constitution & Bylaws," "Statement of Faith" and the following:

Harmony is an organization of likeminded believers submitted to one another in common cause for the purpose of establishing God's Truth. As such, should my view of Bible doctrine or my personal life and conduct come into conflict, I would be willing to meet with the Board and submit to their counsel, up to and including surrendering my credentials.

SIGNATURE _____ DATE _____