

Application for Consecration/Ordination/Charter Membership



Evangelistic Apostolic Church Diocese Application

General Instructions

This application is for individuals who seek Consecration/Ordination or Charter Membership into the Evangelistic Apostolic Church Diocese as Deacons, Parish Priests, Chaplain, Bishop, Archbishop, Pastor, Lay Pastor or Minister. All who wish to be Consecration/Ordination into the Priesthood **MUST HAVE BEEN BAPTIZED.**

Information requested in this application will be kept confidential. All Information submitted with this application would be verified independently, So Please, have detailed in providing dates and locations and all other relevant information. Any material misstatement of fact shall be considered deliberate, and shall be Grounds for rejection of this application. Please Print or Type in all information Below:

Basic Information Printed:

Name:

Address:

City: State Zip:

Home Phone:

Secular Employer:

Address: _____

City: _____ State: _____ Zip: _____

Position: _____ Years _____ Employed There: _____

Do You Make Enough Money to support yourself and Family? Yes ___ No ___

Have You Ever been convicted of a Felony Offense? Yes ___ No ___

If so, describe on a Separate sheet of paper.

Have you ever been convicted of any Misdemeanor Offense? Yes ___ No ___

If so, describe on a Separate sheet of paper.

Has any Court or Institutionalized ever adjudicated you mentally incompetent for any mental illness? Yes___ No___ scribe in detail on a separate Sheet of paper. Do you have any kind of an illness that would interfere with your ability to pastor a parish? Yes___ No___

Describe in detail on a separate sheet of paper.

Pastoral

What denomination are you currently serving?

How long have you been involved with this denomination?

What other churches/denominations have you belonged to in the past?

How long have you been actively ministering? Yes___ No___

Where did you receive your formal training and instruction in theology? Yes___ No___

NOTE: Enclose all copies of any and all college degrees along with this application] Please describe, on separate sheets of paper, your reasons for wanting to Ordination, where you are theologically and how you came to be where you are Theologically. Include also your understanding on the following theological points: The Sacraments, The Real Presence of Christ in the Eucharist, and why You feel you are drawn to it, and any discussions that you have had with your congregation (if any) regarding becoming a Priest into the E.A.C.D. Please take your time and be as detailed as possible.

Are you married? Yes___ No___ If so, how long have you been married? _____

If so, will your spouse approve of your ministry in the Evangelistic Apostolic Church? Diocese? Yes___ No___

Do you have any theological problems with Apostolic Christian Ministry or

Personal obstructions that prevent you from full ordination? Yes___ No___

If so, please state in detail on a separate sheet.

Do you understand that as an Apostolic Church, the E.A.C.D. **Does Not** condone nor officiate same-sex unions, does not ordain homosexual individuals, does not subscribe to gender-neutral language (inclusive language) Bibles, nor any such other innovations and heretical acts? Yes___ No___

Do you understand, that as a Apostolic priest, you will be required to take an oath of loyalty to your diocesan ordinary (Bishop) as his pastoral assistant in ministering to the faithful of the church, and that you must agree to the Code of Canon Law of the E.A.C.D., in its entirety, and fully support it? Yes No

Do you understand that this Diocese is in unity of other denominational liturgy rites? Yes No **Note:** Such as the Anglican Rite, Roman Rite, Celtic Orthodox

Rite, etc... This make the Apostolic Rite a One, Holy Apostolic Church in unity of the Apostolic Succession, We are one Brotherhood for Christ.

Financial History

Have you ever filed for bankruptcy? Yes No so, when? _____

Have you ever been the subject of any civil or criminal action regarding any outstanding debts? Yes No

If so, please state in detail and the outcome on a separate sheet of paper.

Has any church that you personally pastored been the subject of any civil or Criminal investigation into any kind of financial wrongdoing, or misappropriation of Funds? Yes No

If so, please indicate, in detail, the problems encountered which initiated the Investigation, as well as the result of the investigation, on a separate paper. Yes No

Have you ever had to close any church bank account due to problems with If so, please indicate, in detail, the problems encountered which initiated the investigation, as well as the result of the investigation, on a separate sheet of paper.

How many years have you had being in a position of oversight or responsible charge regarding church finances? Yes ___ No ___

If an audit of your current congregation's/parish's financial records were to be requested, would your Board of Directors be able to provide one? Yes ___ No ___

Background Information

City: _____ State: _____ Zip: _____

Number of Years at This Address: _____

City: _____ State: _____ Zip: _____

Number of Years at This Address: _____

List 2 References of people that know you, Do not include relatives:

Acknowledgment of Consecration: Ordination:

I understand that by submitting this Application for Consecration/Ordination that I am not guaranteed acceptance. Further I understand that acceptance shall be based, in part and upon background check from the information. I agree to pay the one time application non-refundable fee of **\$50.00** for processing along with this application. **Upon approval candidate must agree to follow all of Diocese Canons.**

Yes No

Acknowledgment Charter Membership: Only Charter Member Yes ___ No ___

I agree to an application processing **\$20** fee and pay and a yearly annually Charter Membership fee **\$75**. Due before expired date to renewal.

All checks payable to Good Hope Church and mailed to:

Abp. John Johnston

3810 Ropers Church Road Lanexa, VA. 23089

Applicant Signature:

Date:

Must Be Notarized by Notary:

This day of _____, 20 _____ In the State of _____ In the City/County of (or) Country: _

I, _____ having first duly sworn and deposed the above individual under oath, I have set my signature and seal upon this document. My commission end on:

Signature

Signed: ÁÁ

Date:

[NOTARY SEAL AFFIXED]

Payment thru in USD Western Union or Money Gram to:

*John Johnston
3910 Ropers Church Rd.
Lanexa, VA. 23089
Send Code to receive payment
Fill in form attach and send to email to:
bishopjohnston@hotmail.com
Phone: 757-634-9809*