



**Church of God
Ministerial Licensure Application**

**Calling And Ministry Studies for Students
New Minister and Licensure Application Two**
(For Students who have
completed CAMS for Students)

NAME OF APPLICANT:
<hr/>
STATE/REGION:
<hr/>

**CHURCH OF GOD INTERNATIONAL OFFICES
Cleveland, Tennessee, U.S.A.**

Church of God

Calling and Ministry Studies for Students

Calling and Ministry Studies for Students is a ministry formation process to assist you in the ability to discover and fulfill your divine call and place in ministry. **After completing CAMS for Students, an individual who feels a vocational call to ministry and desires to become a credentialed minister in the Church of God, should complete this application and must submit to a background check.**

Upon recommendation of the state/regional Ministerial Development Board and state/regional Administrative Bishop, the applicant will be ready to purchase an Exhorter Study Guide and will be eligible to take the Exhorter exam.

The credentialing journey occurs through personal discovery, education, training, and becoming a minister in the Church of God. It is time to start your journey into the ministry, even while you're still a student. Don't wait—start answering your call right now!



(To order the Exhorter Study Guide, go to:
cogdoe.org and click “Store”)

Calling And Ministry Studies for Students

New Minister and Licensure Application

(Exhorter, Minister of Music, or Minister of Christian Education)

Please indicate which credential: ☐ Exhorter ☐ Minister of Music ☐ Minister of Christian Education

Instructions: *The applicant, after completing CAMS for Students, should complete this new minister and licensure application – Part I. The licensure application should be presented to the applicant's pastor for final approval. The pastor should complete Part II and sign the application in the appropriate location and forward the form to the District Overseer. Once the District Overseer signs the licensure application (page 6), he will forward it to the state/regional office of the administrative bishop.*

PART I: PERSONAL AND MINISTERIAL INFORMATION

1. Have you received your certification for completing Calling and Ministry Studies for Students? ☐ Yes ☐ No
2. Since you completed the CAMSFS application, has any information changed? ☐ Yes ☐ No If yes, please update the information.
3. What have you discovered about your calling since you completed CAMS for Students: _____

4. What ministry activities are you involved in currently? _____

5. Have you read the entire Bible? ☐ Yes ☐ No If no, are you presently engaged in reading the entire Bible through? ☐ Yes ☐ No
6. Have you received the baptism with the Holy Spirit with the evidence of speaking in tongues? ☐ Yes ☐ No

NATIONAL CRIMINAL BACKGROUND CHECK QUESTIONS

(If approved by the administrative bishop to continue with the credentialing process, these questions will be asked again by the Oxford Document Management Company.)

Please check either "yes" or "no" for each question. If the answer to any of the following questions is "yes," please indicate the question number, provide relevant information regarding your response, and indicate resolution of the issues, if any. Use additional paper if necessary.

1. Have you ever been charged¹ with any ethics violation, or are any such actions pending against you? ☐ No ☐ Yes
2. Have you ever been subjected to ecclesiastical disciplinary proceedings? ☐ No ☐ Yes
3. Have you ever been asked to resign or been terminated by a training program or employer? ☐ No ☐ Yes

¹ Throughout this document, "charged" indicates allegations made in writing and known to you.

4. Have you ever had a civil suit brought against you relative to your professional work, or is any such suit pending? ☐ No ☐ Yes
 Have you ever had a professional malpractice insurance suspended or revoked for any reason? ☐ No ☐ Yes
5. Has disciplinary action of any sort ever been taken against you by a licensing board, professional association, or educational/training institution? ☐ No ☐ Yes
 Have there been written complaints against you that did not result in discipline? ☐ No ☐ Yes
 Are there any complaints pending against you before any of the above-named bodies? ☐ No ☐ Yes
6. Have you ever been charged with having sexual contact or attempted sexual contact (sexual intercourse of any kind, intentional touching, or conversation for the purpose of sexual arousal) with individuals you were seeing in a professional context (e.g., a parishioner, a patient, an employee, a subordinate, a student)? ☐ No ☐ Yes
7. Since the age of 18, have you ever been charged with engaging in sexual behavior (sexual intercourse of any kind, intentional touching, or conversation for the purpose of sexual arousal) with individuals under the age of 18 years of age? ☐ No ☐ Yes
8. Have you ever been charged with the production, sale, or distribution of pornographic materials? ☐ No ☐ Yes
9. Have you ever been charged or adjudicated with sexual misconduct, including the following:
 Abuse of power or role for sexual purpose? ☐ No ☐ Yes
 Sexual contact with a minor or an adult incompetent to give consent? ☐ No ☐ Yes
 Sexual assault (e.g. rape)? ☐ No ☐ Yes
 Solicitation for sexual purpose (e.g. prostitution)? ☐ No ☐ Yes
 An offense related to pornography or public indecency (e.g. indecent exposure)? ☐ No ☐ Yes
10. Have you ever been charged with an offense related to sexual harassment, including the following:
 Unwelcome sexual advances? ☐ No ☐ Yes
 Request for sexual favors? ☐ No ☐ Yes
 Sexually motivated physical contact? ☐ No ☐ Yes
 Verbal or physical domination of a sexual nature? ☐ No ☐ Yes
11. Do you have a history of alcohol abuse? ☐ No ☐ Yes
12. Do you have a history of drug abuse with any other drugs: recreational, prescription, over the counter, or illicit? ☐ No ☐ Yes
13. Have you ever been charged, arrested, or convicted for any crimes or misdemeanors? ☐ No ☐ Yes
14. Have you ever been charged with misappropriating funds or otherwise breaching fiduciary duties in any professional capacity? ☐ No ☐ Yes
15. Have you ever been charged with traffic violations? ☐ No ☐ Yes
16. Has your driver's license ever been revoked or suspended? ☐ No ☐ Yes
17. Have you ever had a restraining order, injunction, order for protection, or the like issued against you because of allegations of domestic violence, abuse, or so forth? ☐ No ☐ Yes
18. Is there anything regarding your personal and private life, such as immorality, pornography problems, or other problems, which you knowingly should divulge to those examining you for ministry? ☐ No ☐ Yes

¹ Throughout this document, "charged" indicates allegations made in writing and known to you.

PERSONAL CONSENT AND PERMISSION FORM FOR BACKGROUND CHECK

Your response to the above questions in this application will be helpful to your pastor in completing Part III of this form. It will also assist the administrative bishop and State Ministerial Examining Board to better evaluate you and your current desire to pursue ministry training. By signing below, you are granting permission for this application to be released by the administrative bishop to those he deems necessary in processing your enrollment in CAMS for Students.

"I certify to the best of my knowledge and ability, the information provided in this CAMS for Students Application–Part 1 Form is true, correct, and complete. I authorize investigation of all statements contained in this application, including the conducting of a national criminal background check. I further authorize all references, supervisors, and organizations listed in this application to give the Church of God any and all information concerning my current employment and any other pertinent information, personal or otherwise, that they may have concerned my character or fitness to participate in this program. I release any and all parties from any and all liability for any damage that may result from furnishing such information to the Church of God.

Applicant's Signature _____ Date _____

(Applicants under 18 years of age are required to have a Parent/Guardian Signature)

Parent/Guardian Signature _____ Date _____

PART II: PASTOR'S RECOMMENDATION

1. Would you need to change any information in your previous ministry and personal recommendation for this applicant? ☐ Yes ☐ No If yes, please explain: _____
2. Do you know of any reason why the applicant, after completing CAMSFS program, is not qualified to be credentialed in the Church of God? ☐ Yes ☐ No
If no, please explain: _____

Recommendation of Pastor – CAMSFS Licensure Application

I recommend the applicant for the exhorter credential.

☐ Yes ☐ Yes, with reservations ☐ No

If yes with reservations, please write an explanation. _____

Signature: _____ Date: _____

Recommendation of District Overseer – CAMSFS Licensure Application

I recommend the applicant for the exhorter credential.

☐ Yes ☐ Yes, with reservations ☐ No

If yes with reservations, please write an explanation. _____

Signature: _____ Date: _____

Recommendation of Administrative Bishop – CAMSFS Licensure Application

I recommend the applicant for the exhorter credential.

☐ Yes ☐ Yes, with reservations ☐ No

If yes with reservations, please write an explanation. _____

Signature: _____ Date: _____

The recommendation of the State Ministerial Examining Board is made after the applicant completes Calling and Ministry Studies for Students.

[To be completed by the State Ministerial Examining Board]

**Recommendation of the State Ministerial Examining Board
CAMSFS Licensure Application**

After reviewing the application form and interviewing the applicant, does the State Ministerial Examining Board recommend the applicant for licensure? ☐ Yes ☐ No

Give reasons: _____

Signature of Board Members:

Date Interviewed: _____

Chairman: _____

Member: _____

Member: _____

FOR STATE OFFICE USE ONLY

To: Presiding Bishop _____
(Name)

This is to certify that _____
(Name)

Has been duly examined on the doctrine and government of the Church of God by the State Examining Board of _____ and is hereby recommended for the rank of exhorter.

Date of Examination _____ Grade _____

*Administrative Bishop, please fill in all the above blanks.
(This application should be filed with the CAMSFS Program Application)*

Signatures of the Administrative Bishop and the State Ministerial Examining Board

_____	_____
Administrative Bishop	Ordained Bishop
_____	_____
Ordained Bishop	Ordained Bishop

FOR INTERNATIONAL OFFICE USE ONLY

Credential File Number: _____

RANK OF MINISTRY: ☐ Exhorter ☐ Minister of Christian Education ☐ Minister of Music

STATUS: ☐ New ☐ Reinstated

Name _____

☐ Male ☐ Female Date of Birth _____ Nationality _____

Approved By _____
(Presiding Bishop)

Date Approved _____

Credentials issued on: _____

Credentials delivered to: _____

Administrative Bishop of: _____ Date: _____

Remarks: _____