



APPLICATION FOR MINISTERIAL CREDENTIALS

Presiding Prelate

Submission Date (mm/dd/yyyy): ___/___/20___ **Bishop Lloyd E. Russell, DD**

Type: New Applicant | Renewal | Adv:

OFFICE OF THE GENERAL SECRETARY

249 Newfield Ave. | Hartford | CT | 06106
Phone: 860-953-1195 | ptami@ptachurch.org

Credential Fee: Bishop: \$300 | Overseer, Pastor/Elder: \$150 | Elder not Pastoring:

Applicant's Full Name: (Mr., Mrs., Miss.)

D.O.B: (mm/dd/yyyy) ___/___/___

(Last) _____ (First) _____ (M.I) _____

Bishop | Overseer | Pastor | Elder | Minister | Deacon | Deaconess | Evangelist | Missionary | Jr. Minister | Jr. Missionary

Marital Status: Single ___ Married ___ Separated ___ Divorced ___ **Spouse's Name:** _____

Year Baptized in Jesus Name: _____ **Your Pastor's Name:** _____

Year Received the Holy Ghost: _____ Church: _____

Home

Address: _____ **City:** _____ **State:** _____
(Province/Parish, if not US) (Country, if not US)

Zip Code: _____ **Telephone:** _____

Do you have formal ministerial training or certification through a Bible School, Seminary, etc.? Yes ___ No ___

Do you serve faithfully in and submit to the pastoral authority in your local assembly? Yes ___ No ___

Have you read, understand, and agree to abide by the PTAMI Bylaws? Yes ___ No ___

Have you ever been convicted or is pending criminal charges (Larceny/sexual misconduct/etc.)? Yes ___ No ___
If yes, explain on a separate sheet

Will you abide by the PTAMI policy of Marriage and Sexual Conduct? Yes ___ No ___

Applicant's Pastor Signature: _____ Applicant's Signature _____

(Applicant's Pastor must recommend and sign, except in unusual situations)

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Application Fee Attached: Yes ___ No ___

If rejected, give reason(s) _____