Credential Pre-Application Questionnaire

We are glad that you are pursuing ministerial credentials through the Arizona Ministry Network. Could you take a few moments to complete the questionnaire below? Once complete, you will be contacted about your next steps.

avout y	our next steps.			
Full Name: Date of		Date of Birth		
Address	3:			
Spouse Name (if applicable):				
Email:		Cell:		
Spiritu	ual Background			
Have you:				
1.	Had a born-again salvation experience?	Yes	No	
2.	Been baptized in water by immersion?	Yes	No	
3.	3. Received Baptism in the Holy Spirit with the initial physical evidence of tongues?			
N 41	un a De alcana de al	Yes	No	
	try Background			
	Do you sense a call to ministry and can you articulate it?	Yes	No	
5.	Please tell us about your educational background:			
	High School Graduate			
	College University Name of University and Degree Earned			
	Berean / ASOM Courses			
	Other			
6.	What Church are you S _ W_ TWdaXI			
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Marital Background				
7.	Are you Married?	Yes	No	
8.	Do you or your spouse have a former spouse still living?	Yes	No	
Additional Information				
	Have you ever declared Bankruptcy?	Yes	No	
	Do you have any felony or misdemeanor charges on you			