



**Evangelical Friends Church**  
EASTERN REGION

## APPLICATION FOR EFC-ER MINISTER'S LICENSE

Name (as it should appear on the card) \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Church \_\_\_\_\_ Position/Ministry Focus \_\_\_\_\_

### Experience and Preparation

Level of education completed:      High School      College      Graduate      Doctorate

List your institutions of higher education and years of graduation:

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- 
- 

List your employment or experience related to your area of licensure:

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- 
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### Testimony and Vision

Briefly tell us about your conversion and walk with the Lord (use the reverse side as necessary):

Briefly tell us about how you plan to use any licensure you may obtain (use the reverse side as necessary):

### Agreements

In the spirit of Paragraph 1253 of EFC-ER's *Faith and Practice* ("Acceptance of ministerial credentials and/or pastoral responsibility in EFC-ER becomes tacit and legal acceptance of the doctrine, testimonies, and organizational provisions stated in *Faith and Practice*."), we ask the following questions.

Have you read the EFC-ER *Faith and Practice*?      Yes      No

Are you in agreement with its teachings?      Yes      No

\_\_\_\_\_  
Signed

**As lead pastor of this church, I endorse and approve of providing the appropriate license to this individual.**

\_\_\_\_\_  
Lead Pastor Signature      \_\_\_\_\_ Date

2/21/18 jb

This form must be returned to the Evangelical Friends Headquarters before April 13, 2018 to be considered for licensure for 2018.