

635 Haywood Road, Greenville, South Carolina 29607 USA  
 Phone: 011-1-864- 281-1520, Ext. 1244 ❖ Fax: 011-1-864-281-1512 ❖ Email: gsmith@rwoc.org

## ***INTERNATIONAL APPLICATION FORM***

1. Applications are for individuals. If you and your spouse are both applying, two separate application packages must be completed and submitted.
2. PLEASE TYPE or PRINT CLEARLY in English. If a question does not apply, type or print DNA.
3. Attach a CURRENT PHOTO of head and shoulders only.
4. See RMF brochure for a description and general qualification for each credential category. I am applying for (please check one):
   
 Ministry Certificate     License     Ordination     Membership

\* REQUIRED \*

ATTACH A RECENT  
 HEAD AND SHOULDERS  
  
 PHOTO HERE

### ***PERSONAL DATA***

Please print or type information in English.

Mr./Mrs./Ms. \_\_\_\_\_  
 Name (last) (first) (middle) (maiden)

Present Mailing Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Nation \_\_\_\_\_ Mail Code \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Other Phone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Web Site: \_\_\_\_\_

Your Gender:     Male     Female    Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_    Age: \_\_\_\_\_

Spouse: Name \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_    Age: \_\_\_\_\_

Marital Status:     Engaged\*     Married     Single     Divorced\*\*     Separated\*\*

\* If you are currently engaged, send us written confirmation once you are married to update our records. Your fiancé(e)'s name: \_\_\_\_\_

\*\* If a divorce or separation has occurred in the past 3 years, please attach complete details typed on separate sheet.

## ***CHURCH AFFILIATION AND REFERENCES***

Print or type the name of the church which you currently pastor or are a member of.

Name of Church \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Phone

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Nation \_\_\_\_\_ Mail Code \_\_\_\_\_

Senior Pastor \_\_\_\_\_ Denomination/Organization \_\_\_\_\_

## ***PERSONAL / MINISTRY CHARACTER REFERENCES***

Please identify two references other than family members who have known you for more than a year.

Name \_\_\_\_\_ Street Address \_\_\_\_\_

City \_\_\_\_\_ State or Nation \_\_\_\_\_ Mail Code \_\_\_\_\_ Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Street Address \_\_\_\_\_

City \_\_\_\_\_ State or Nation \_\_\_\_\_ Mail Code \_\_\_\_\_ Email Address \_\_\_\_\_ Phone \_\_\_\_\_

## ***YOUR MINISTRY***

Do you have a definite call of God on your life for full-time ministry?  Yes  No If yes, please explain:

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Please share a statement of your current involvement in ministry.

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Are you presently or have you ever been licensed or ordained?  Yes  No

If so, please list the denomination(s)/organization(s), credential level, and date. Please attach a copy.

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How did you hear about RMF? \_\_\_\_\_

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### ***STATEMENT OF TRUTH***

I understand all items submitted to RMF as part of this application process become the permanent property of RMF and will not be returned.

This application will be held in confidence. Only those persons with a need to know will review it. I hereby grant RMF and its leadership permission to verify the information provided on this application.

I hereby state that all the information contained on this application is correct and true. If RMF is notified that any of the information contained on this application is false; it will be grounds for immediate cancellation of application procedure and/or revocation.

\_\_\_\_\_  
Signature of Agreement

\_\_\_\_\_  
Date

### ***AGREEMENT***

Upon acceptance of ministerial credentials or membership from Redemption Ministerial Fellowship (RMF), I hereby agree to the following:

To uphold the standards of Holiness and Godly conduct that are set forth in the Word of God governing ministers, in my personal life as well as my professional life;

To submit to the leadership and spiritual covering provided by RMF, and to receive wisdom, counsel and restoration available through RMF leadership;

To support the fellowship with my prayers, financial support, moral support and with my presence at all meetings and functions provided by the fellowship whenever possible;

To maintain a level of professionalism and quality of ministry that will enhance the Kingdom of God and be an asset to Redemption Ministerial Fellowship; and

Ordination ceremonies will take place at Redemption World Outreach Center, Greenville, South Carolina; in the applicant's nation at an RMF Conference; or, at a local church.

I prayerfully and willfully submit this application this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

### ***APPLICATION FEE***

There is no set Application fee for RMF International Applicants due to the various personal and national economic situations in different countries. Instead of a set application fee, a voluntary offering may be sent to RMF as you are able to give. Your application will be processed with or without a voluntary offering. Thank You!

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## INTERNATIONAL MINISTER'S RECOMMENDATION FORM

**Applicant (read carefully):** Please give this recommendation form to your pastor, bishop, or spiritual overseer who is ordained to full-time ministry and has known you well for at least two years. Please print or type information in this box **before** passing along for completion.

Mr./Mrs./Ms. _____			
Applicants Name- (last)	(first)	(middle)	(maiden)
Present Address _____		City _____	State _____ Zip _____
Phone: Home _____	Phone: Work or Cell _____	Email Address _____	
Name Church or Ministry: _____			

**Recipient (read carefully):** Print Your Name: \_\_\_\_\_

Your name has been given as a reference for the above named person for membership into the Redemption Ministerial Fellowship International (RMFI). Serious consideration will be given to your comments; therefore, we ask that you carefully complete this form. Please be assured that your comments will be held in the strictest confidence. Please return this completed form **directly to the RMFI** at the above address or fax number. Should you have any questions feel free to contact us. In order to maintain integrity and accountability in ministry, please contact us if anything in your recommendation changes in the future. Thanks you for your valuable input.

- How long have you known the applicant? \_\_\_\_\_ Years \_\_\_\_\_ Months
- Do you feel that you know the applicant well enough to evaluate his/her eligibility for ministry credentials?  
 Yes  No
- What is your relationship to the applicant?  
 Friend  Pastor  Other: \_\_\_\_\_  
 Casual  Intimate  Professional
- How well do you know him / her?  
 By name / sight  
 Casually / few personal contacts  
 Fairly well / numerous personal contacts  
 Very close ministry relationship  
 Mentoring relationship

Comments: \_\_\_\_\_  
\_\_\_\_\_



16. Having observed this person in the ministry, would you:  
 Highly recommend     Recommend     Recommend with reservations     Do Not Recommend

Please explain: \_\_\_\_\_  
 \_\_\_\_\_

17. To aid us in our decision making, please give us your personal comments on the integrity of the applicant. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

18. List what you consider to be the applicant's strong points. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

19. List what you consider to be the applicant's weak points. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

20. Please indicate your rating in the areas below:

	Above Average	Average	Below Average	Not Able to Observe
Leadership				
Responsibility				
Christian Commitment				
Moral Character				
Integrity / Honesty				
Emotional Stability				
Personal Appearance				

21. Does the applicant have any personality traits which impair his / her relationship with others? \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

22. Please share with us any information you may know about the applicant that would help in our evaluation for membership. Specific incidents or an overall personality appraisal may be given.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

