

**Ordination/Recognition Questionnaire**  
**For Ordination Candidate or Ordained Ministers Requesting Recognition of Credentials**  
*Church of the Nazarene*

**Instructions:** This questionnaire should be provided to the district secretary or the district superintendent at least two weeks prior to your scheduled interview. The Ministerial Credentials Board of your district will use it to consider your request for ordination or recognition.

<input type="checkbox"/> <b>Candidate for Ordination</b>  <input type="checkbox"/> Elder Candidate  <input type="checkbox"/> Deacon Candidate	<input type="checkbox"/> <b>Candidate Requesting Recognition of Credentials</b>  <input type="checkbox"/> Elder Candidate  <input type="checkbox"/> Deacon Candidate
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Date: \_\_\_/\_\_\_/\_\_\_  
mm/dd/yy

**APPLICANT'S INFORMATION**

Full Name: \_\_\_\_\_  Male  Female  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ E-mail: \_\_\_\_\_  
 (City/State or Province/Postal Code)

District: \_\_\_\_\_ Local Church Membership: \_\_\_\_\_  
 Social Security #: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Birthplace: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_  
 Spouse's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Birthplace: \_\_\_\_\_  
 # of Children: \_\_\_\_\_ Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

- For additional children's names and birth dates, please list on a separate piece of paper and attach to this application.

**EDUCATION INFORMATION**

*List all schools attended and degrees earned.*

School	Name	Year Graduated	Degree	Major/Minor
High School				
College/University				
Bible College				
Seminary				
Other				

Have you completed a validated Course of Study for licensed ministers?  Yes  No

Have you ever been licensed or ordained by the Church of the Nazarene?  Yes  No

If yes, list the most recent district that granted you a district license along with the date it was granted or the year of ordination and district on which it took place :

District: \_\_\_\_\_

Date: \_\_\_\_\_

**ORDINATION AND RECOGNITION CANDIDATES**

All persons applying for ordination or for recognition by the District Assembly should complete questions 1 through 19.

1. Do you have a definite call to preach?  Yes  No  
Do you have a definite call to lifetime Christian ministry?  Yes  No  
How long have you had such a call? \_\_\_\_\_

2. Date converted: \_\_\_\_\_ Date sanctified: \_\_\_\_\_

3. Personal testimony:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you been divorced?  Yes  No

Details of said divorce of the applicant must be submitted to the presiding General Superintendent in jurisdiction for their review, in accordance with *Manual* paragraphs 320 & 427.1 (#7, #8).

Have you done so?  Yes  No If these have not been submitted, immediate contact should be made with the District Secretary about it.

5. Has your spouse been divorced?  Yes  No

6. If married, are you now living with your spouse?  Yes  No  
If no, please explain: \_\_\_\_\_

7. Are your spouse and children in good health?  Yes  No  
If no, state particulars: \_\_\_\_\_

8. Are there physical irregularities in your family that would hinder your ministry?  Yes  No  
If yes, please explain: \_\_\_\_\_

9. Does your spouse support you in your commitment to fulfill your calling?  Yes  No  
If no, please explain: \_\_\_\_\_

10. List your financial debts.

Financial Debt	Amount

11. Are you behind on any debt or obligation?  Yes  No  
If yes, explain: \_\_\_\_\_

12. Are you in full sympathy and hearty accord with the standards, doctrines, and government of the Church of the Nazarene?  Yes  No

13. If, after you have been ordained (or recognized) by the Church of the Nazarene, you find you cannot conform to the standards, doctrines, and government of said church or wholeheartedly support the church and its institutions, will you voluntarily surrender your credentials and withdraw from the ministry without charges or trial?  Yes  No

14. Have you read in the Church of the Nazarene *Manual* "The Ministry & Christian Service?"  
 Yes  No

15. Will you wholeheartedly support the church and its institutions?  Yes  No

16. Members received on profession of faith for the past two years \_\_\_\_\_  
 Net Membership Increase \_\_\_\_\_ Membership Decrease \_\_\_\_\_

17. Has your church met its financial obligations? District:  Yes  No  
 General Church:  Yes  No Education:  Yes  No  
 If no, please explain: \_\_\_\_\_

18. Number of pastoral calls made annually for the past two years \_\_\_\_\_

19. Do you sense the urgency of Christians being entirely sanctified, and does your ministry result in the sanctification of believers?  Yes  No  
 How many would you estimate were sanctified wholly under your ministry during the past two years?  
 \_\_\_\_\_

**ORDINATION CANDIDATES ONLY**

*All persons applying for ordination by the District Assembly should complete questions 20 through 23.*

20. Do you plan to give your full time to the ministry?  Yes  No

21. Have you had trouble with any local church of which you were either a pastor or an associate pastor?  
 Yes  No If yes state particulars: \_\_\_\_\_

22. Year first granted a district minister's license: \_\_\_\_\_ By which district? \_\_\_\_\_

23. Record of Licensed Ministry

Year	Licensed by District	Served as *	Place

\*Evangelist, pastor, teacher, student, other. If other, explain.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**RECOGNITION CANDIDATES ONLY**

*Ordained ministers from another denomination desiring to have his/her credentials recognized by the Church of the Nazarene should complete questions 24 through 33. **EXCEPTION:** If the minister was originally ordained in the Church of the Nazarene, the process for a current credential is to be "Restored to the Roll."*

24. Date ordained: \_\_\_\_\_  Ordained Elder       Ordained Deacon

25. Name of church: \_\_\_\_\_

26. Name of district or conference: \_\_\_\_\_

27. What signatures appear on your credentials?  
 Chairman's Name: \_\_\_\_\_  
 Secretary's Name: \_\_\_\_\_  
 Other: \_\_\_\_\_

**28. Record of Ministry for Last Seven Years**

<b>Year</b>	<b>District or Conference</b>	<b>Served as *</b>	<b>Place</b>

*\*Evangelist, pastor, teacher, student, other. If other, explain.*

29. Did you give full time to the ministry?       Yes     No  
 If any additional occupation, explain: \_\_\_\_\_

30. If a pastor, have you had trouble with any church you were pastoring?       Yes     No  
 If yes, state particulars: \_\_\_\_\_

31. Are you now in active ministry?       Yes     No  
 If no, why? \_\_\_\_\_

32. Explain your reason(s) for joining the Church of the Nazarene  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

33. Have you read in the Church of the Nazarene *Manual* the "Recognition of Ordained Minister's Orders"?       Yes     No

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_