

## **Denominational Transfer Application for Ministers**

## **TRANSFER STEPS:**

- 1. The Wesleyan Church district superintendent receipt of your application and the documentation below.
- 2. The Wesleyan Church General Superintendent approval for beginning the transfer process.
- 3. District board of ministerial development examination.
- 4. Completion of denominational history and polity course (or other Education and Clergy Development Division required courses).
- 5. Completion of required minimum of one-year of service under The Wesleyan Church district appointment.
- 6. The Wesleyan Church district board of ministerial development recommendation and district conference final approving vote to receive applicant.

## **APPLICATION INSTRUCTIONS:**

Send the completed application form and documents listed below to The Wesleyan Church district superintendent of the district to which you wish to transfer. District superintendent contact information is available at <a href="https://www.wesleyan.org/about/districts">https://www.wesleyan.org/about/districts</a>.

	A valid letter of standing from the transferring denomination or district.				
	A photocopy of your ordination certificate (or certificate of current level of ministerial standing).				
	A photocopy of your ministerial pocket credential (if any) identifying you are a ministe in good standing.				
	Photocopies of all transcripts or other official records for your ministerial education.				
transfer th	steps above are an abridged version of the steps in the process for credentialed ministers seeking to neir credentials to The Wesleyan Church. For a more comprehensive list of steps, please reference IMP-411 through MMP-416.				
APPLIC	ANT INFORMATION:				
Name _					
	Birth Date				
Wesleya	n district you wish to join.				
Email ac	ldress				
	/City/State/Zip				
	ne Office Phone				
Citizensl	nip Status				

Current ministerial status: Licensed	Commissioned _	^Ordained
*If ordained, give date of ordination		
or association who issued the ordination	on	
Number of years in ministry as: an ord	lained minister (elder)	and/or an
ordained deacon		
Reason for transferring to The Wesley	an Church	
Have you ever forfeited your ministeria	al credentials?	
If so, please provide reason(s)		
LIST TIME AND CIRCUMSTANCES (	OF THE FOLLOWING	) <b>:</b>
Conversion		
Entire Sanctification		
Call to Ministry		
EDUCATION:		
List all colleges/universities and/or ser	minaries you have atte	nded, and degrees earned:
Colleges/Universities and/or Seminario	es Degrees	Dates Attended
MINISTRY RECORD:		
List your previous ministerial appointm	nents.	
Church & Address Pos	ition Denor	mination Dates

MARITAL STATUS:						
☐ Married ☐	Never married	Widowed	Divorced	Remarried		
If applicable, spou	se's name					
If applicable, spouse's name Spouse Cell						
Spouse Email						
Religious Background Vocation						
Education						
Level of support for	r ministry					
If divorced and ren	narried, briefly ex	xplain circumsta	nces			
CHILDREN:						
Name(s)			Age	Sex		
GIVE BRIEF STA	TEMENTS OF Y	OUR UNDERS	TANDING OF TH	E FOLLOWING KEY		
DOCTRINAL ISSU	JES:					
Scripture origin, au	uthority and accu	racy				
Christian holiness						
Believer security _						
Women in ministry	ı					

## PROVIDE A REFERENCE FROM THE OFFICIAL RESPONSIBLE FOR YOUR CREDENTIALS AND A SECOND REFERENCE FROM ANOTHER DENOMINATIONAL LEADER (GENERAL OR DISTRICT):

Name	Position
Address	
	Cell Phone
Name	Position
Address	
Office Phone	Cell Phone
AUTHORIZATION AND RELEAS	E OF INFORMATION FORM:
reference listed on this application material information about me. I at I have not listed, to release any its serving as a minister in The Wesle consumer report, to do a criminal provided. Furthermore, I waive any or organization which provides information only the communication	ch and its agents to contact any person, organization, or to confirm information supplied by me and/or to obtain other uthorize all persons and organizations, including others whom nformation about my qualifications, character and fitness for eyan Church. I authorize the Church to make an investigative of the cords check, and to verify any other information. I have a rights I may have to confidentiality. I also release any person formation from any and all liability for providing that information of knowingly false information. I have read this waiver and aware of its contents. I sign this consent freely and under no
Application's Signature	
Printed Name	Date
DISTRICT SUPERINTENDENT C	ERTIFICATION:
recommendation of this candidate credentials and transcripts, to the Having verified the information credentials and good standing,	date this application in the space below to certify your e. Send approved application form, along with copies of all General Superintendent at <a href="mailto:transfer@wesleyan.org">transfer@wesleyan.org</a> .  In this application and the candidate's ministerial arecommend
District Superintendent's Signa	ature ————————————————————————————————————