



CLERGY CREDENTIALS APPLICATION

LOGOS GLOBAL NETWORK, INC.
1000 Savage Ct. Ste. 1010C | Longwood, FL 32750
Phone: 1-888-985-6467 | www.lgnfamily.org

Referred by:
Name _____
Email _____
Phone _____

This application packet is for individuals who are seeking ministerial credentials through Logos Global Network. Please be certain that each application contains all of the required information and documentation for processing. Incomplete applications cannot be processed. An application fee of \$25 is due with application. The credential fee will be invoiced after completion of the review process.

☒	INDIVIDUAL APPLICATION CHECKLIST
☐	Completed Application
☐	Current Resume (vocational and ecclesiastical)
☐	Current Color Professional Headshot (2x2 preferred; no selfie)
☐	Reference Forms

SECTION ONE – APPLICATION STATUS

Do you reaffirm your personal commitment to cooperate with and support the vision of LGN and work in cooperation with its appointed leaders?

☐ **YES** ☐ **NO** If “No”, please attach letter of explanation

SECTION TWO – MINISTERIAL CREDENTIALS

- ☐ **Commissioned Christian Minister** Annual Credential Fee: \$125.00
- ☐ **Licensed Christian Minister** Annual Credential Fee: \$175.00
- ☐ **Ordained Christian Minister** Annual Credential Fee: \$225.00

(Add one-time application fee of \$25.00)

Process payment at lgnfamily.org with credit card or mail check.

All credential holders are required to maintain their annual membership with Logos Global Network in order for their credentials to be valid. **Compliance Section, Ministerial Credentials, Article 10 of the LGN Constitution & By-laws.**

SECTION THREE – INDIVIDUAL MEMBER INFORMATION

Do you want title printed on ID Card? ☐ Yes ☐ No

Title: _____

Full Legal Name: _____

Home Address: _____

City / State / Zip: _____

Phone: _____

Email: _____

Date of Birth: _____

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Re-Married ☐ Widowed

Anniversary: _____

Dependents: _____

**Please specify names and ages of dependent children.*

SECTION FOUR – INDIVIDUAL BACKGROUND INFORMATION

Church Name: _____

Church Membership: ☐ Yes ☐ No How long have been a member: _____

**If you are not currently a member, please provide a letter of explanation.*

Pastor's Name: _____

Church Address: _____

City / State / Zip: _____

Church Phone: _____

Church Website: _____

Church Email: _____

Why have you chosen LGN for ministerial credentials? ☐ Agreement with LGN Vision

☐ Legal Benefits of Credentials ☐ Convenience ☐ Other _____

Have you ever been licensed through another organization?

Name of Organization: _____

License Held: _____

Have you ever been ordained through another organization?

Name of Organization: _____

Ordination Held: _____

May we contact your previous organization for a reference? ☐ Yes ☐ No

If no, please provide an explanation:

Have you ever been convicted of a felony? ☐ Yes ☐ No

Are you a party to any current legal action? ☐ Yes ☐ No

Are there any legal judgements against you? ☐ Yes ☐ No

****If “Yes”, please attach letter of explanation.***

In making this application, I hereby authorize Logos Global Network to review and confirm by such means as they shall deem appropriate any and all information I have provided herein. I hereby specifically request and authorize the release of any background information which shall be necessary for such review in the processing of my application for membership and/or credentials.

DATE

SIGNATURE OF APPLICANT