

- Individual Member

Application for Membership

*Vanguard Associate Membership

*Vanguard Covenant Membership

Initial Application

Your initial application for membership with Vanguard Ministries should include the following:

1. A completed Vanguard Ministries Application for Membership form
2. A recommendation letter from an ordained Christian minister
3. Recent digital, color photograph
 - *Individual photo of yourself
 - *Group photo of your immediate family
4. A check in the amount of \$25.00 for the initial processing fee

Please allow at least two full months for processing and notification regarding your application.

Interview and Recommendation

Consideration of your initial application includes an accompanying follow-up process:

1. If you are applying for ordination with Vanguard Ministries, the Vanguard Accreditation Council will appoint an Ad Hoc Credentials Committee to schedule an interview with you (either in person or via telephone).
 - a. The committee will notify you and the Accreditation Council in writing of their recommendation concerning your application for membership.
 - b. Approved ordination candidates will be scheduled for the annual ordination ceremony at the annual leadership conference.
2. All candidates who are recommended for membership will indicate their acceptance of the recommendation by payment of the annual dues:
 - a. Vanguard Associate Member - \$22.00 per month or \$250.00 per year
 - b. Vanguard Covenant Member - \$42.00 per month or \$450.00 per yearDues are payable by check, Visa or MasterCard.
3. Confirmed applicants will receive a dated membership card and certificate, confirming them as members in Vanguard Ministries and thus mutually accountable through the annual review and reporting process.

Application for Membership

Are you applying for: Vanguard Associate Membership

Vanguard Covenant Membership

Senior Pastor of Member Church

Please, let us know who referred you to Vanguard Ministries

PERSONAL DATA

1. Name _____

First Middle Last

Nickname _____ Gender Male Female

2. Home Address _____

City _____ State/Country _____ Zip Code _____

3. Citizenship _____ Birthdate _____
Country Month/Day/Year
4. Contact Numbers _____
Home Fax Cellular
_____ Email
5. Marital Status Married Single
6. If currently married _____
Spouse's name
Is your spouse saved? Yes No
Spirit-baptized? Yes No
7. If you have ever been divorced, please explain circumstances _____

8. Spouse's Birthdate _____ Wedding Anniversary _____
Month/Day/Year Month/Day/Year
9. Is your spouse fully supportive of your ministry? Yes No
10. Do you have children and/or step-children?
Name Age Residence (City & State)
- a. _____
b. _____
c. _____
d. _____
e. _____
11. Are any persons, other than spouse or children, living with you? Yes No
If yes, please list:

- Name Relationship
12. Do you or anyone in your household currently have physical or mental situations requiring on-going medical attention that would affect your ability to minister? No Yes
If yes, please explain _____

13. Have you engaged in adultery or homosexuality since you were saved? No Yes
If yes, please explain _____

14. Have you ever engaged in substance abuse?
 Never Yes-Only in my past Yes-I still struggle from time to time
If yes, please explain _____

15. Describe your current financial situation:
 Little or no debt Moderate debt Serious debt Considering bankruptcy
If either of the latter two, please explain _____

16. If you have written a personal vision/mission statement, please provide:

17. Record your approximate spiritual milestone dates:
_____ Salvation _____ Holy Spirit baptism _____ Called into ministry _____ First ministry license
Briefly describe your call to ministry or Christian leadership:

18. Have you written or published any materials? Yes No

If yes, please describe _____

EDUCATIONAL INFORMATION

19. High School (check grade completed) 9 10 11 12 Graduated
GED

College/University/Bible School Location (City & State) Degree or Years
attended

EMPLOYMENT

20. Current Employer

Address

City _____ State/Country _____ Zip + 4

MINISTRY BACKGROUND

21. In what ministry setting are you presently serving? Local Church Para Church
 Educational Institution Chaplain Other _____

What is your position/role?

Do you serve: Full-time Part-time Volunteer Compensated

22. Ministry Name

Ministry Address

City _____ State/Country _____ Zip + 4

Telephone _____ Fax

If the Ministry has a website, please provide the URL address

23. What is the ministry's mission?

24. Summarize your previous ministerial service:

	Church/Ministry Setting	Position/Role	Years
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a.

b.

c.

d.

(If necessary, continue summary on a separate page.)

25. Have you ever been disassociated from, or disciplined by, a ministry? No Yes
If yes, please explain _____

26. List any prior ministry (or ministries) with which you have been licensed or ordained.

a. License Ordination _____
Name of Ministry _____

b. License Ordination _____
Name of Ministry _____

c. License Ordination _____
Name of Ministry _____

d. License Ordination _____
Name of Ministry _____

27. Have you ever been denied License or Ordination? No Yes

If yes, please explain _____

28. Are you seeking credentials from Vanguard Ministries? No Yes

If yes, under which of the following designations do you wish to be certified?

Licensed Minister Ordained Minister

29. Why do you wish to affiliate with Vanguard Ministries?

30. Can you subscribe to Vanguard Ministries Statement of Faith and Core Values? Yes
 No

31. Unless you are the Senior Pastor of a church, name your current pastor and church membership.

Pastor's Name _____

Church Name _____

Church Address _____

City, State, Zip _____

Church Telephone Number _____

32. What person do you presently recognize as personal pastor and/or spiritual mentor?

Name _____

Telephone Number _____

Ministry Name _____

33. As you look forward to the coming year, please share some of your ministry goals.

a. _____

b. _____

c. _____

d. _____

e. _____

34. Please list any/all areas of expertise or experience.

a.

b.

c.

d.

e.

May others call on you for advise/help in the areas listed above? Yes No

REFERENCES

35. List four persons (other than relatives) who are familiar with your character and your recent ministry

reputation, qualifications and experience. (We prefer at least two of these personal reference be

licensed or ordained ministers).

1.

Name	Telephone Number
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Address	City, State, Zip
Relationship	

2.

Name	Telephone Number
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Address	City, State, Zip
Relationship	

3.

Name	Telephone Number
------	------------------

Address	City, State, Zip
Relationship	

4.

Name	Telephone Number
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Address	City, State, Zip
Relationship	

Thank you! You may mail your completed application to:

Vanguard Ministries
149 Business Park Drive
Virginia Beach, VA 23462

Or fax the completed application to 757-499-2960