



Harvest International Ministries Ministerial Affiliation  
 William Tracy and Lori Harris  
 4000 Arkansas Boulevard  
 Texarkana, AR 71854  
 Ph: (870)774.4446 ksosebee@experiencehim.org

ALL APPLICANTS PLEASE PRINT OR TYPE THE INFORMATION IN ONE OF THE APPROPRIATE COLOR SELECTIONS BELOW:

Type of affiliation you are seeking:  HIM Christian Ministry Affiliate (Licensed/Christian Worker)  HIM Church Affiliate (Organization)  HIM Legacy Affiliate (Ordination)

DATE \_\_\_\_\_, 20\_\_\_\_ TITLE:  Dr.  Reverend  Mr.  Mrs.  Miss

NAME \_\_\_\_\_

NOTE: Spouses applying for ordination are REQUIRED to fill out a separate individual application.

\* Address where you wish to receive correspondence (CD, magazine, etc).

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (home) \_\_\_\_\_ (cell) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

\*Address where you wish to receive correspondence.  Please contact me concerning hosting regional meetings.

CHURCH/MINISTRY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (home) \_\_\_\_\_ (cell) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

\*Address where you wish to receive correspondence (where credentials need to be mailed).

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (home) \_\_\_\_\_ (cell) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

Citizenship \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Marital Status:  Single  Married  Divorced  Widowed

\*If you are divorced or remarried to a divorcee, attach a letter with an explanation of details.

Spouse's name \_\_\_\_\_ Number of children \_\_\_\_\_

**ALL APPLICANTS PLEASE PRINT OR TYPE THE INFORMATION BELOW:**

Are you secularly employed? \_\_\_\_\_

If yes, position held and name/address of employer \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, explain on a separate page

What is the highest level of education attained?  Elementary  High School  
 College  Post College

How long have you been a born again Christian? \_\_\_\_\_

How long have you been baptized in the Holy Spirit? \_\_\_\_\_ Do you speak in tongues? \_\_\_\_\_

Into what area of ministry do you feel God has called you? \_\_\_\_\_

What are your present ministry responsibilities?  Pastor  Missionary  Evangelism  
 Christian Education  Other

Explain other: \_\_\_\_\_

\_\_\_\_\_

Give a brief explanation of your present ministry: \_\_\_\_\_

\_\_\_\_\_

Do you currently have credentials with another ministerial organization? \_\_\_\_\_

Is so, what is the name of present ministry denominational or organizational affiliation? \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

What is the name and address of your home church? \_\_\_\_\_

\_\_\_\_\_

What is your pastor's name and address? \_\_\_\_\_

\_\_\_\_\_

Give a concise statement of faith: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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