

Application for Specialised Ministry

**THE APOSTOLIC FAITH
MISSION OF SOUTH AFRICA**



NATIONAL OFFICE

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Application for Registration of a Specialised Ministry In Terms of Section 7.2 of the Constitution of the AFM of SA

Name of Ministry :

Has the Constitution/ Policy of the Ministry been developed? YES NO

(If the answer is yes, a copy of the policy must be included in this application)

Does the Ministry ascribe to the AFM's Confession of Faith? YES NO

To which Statutory bodies of the church will you as an AFM Pastor, be accountable?

Assembly :

Region :

Name of Pastor/
Assembly Leader :

Correspondence :
Address

Postal Code :

Kindly answer the following questions and provide written proof where necessary:

If the ministry involves a new assembly, does it have an assembly policy? YES NO

If answer is YES :

Has this assembly policy been approved of by the Region/Network in terms of section 2.4.1 of the church constitution? YES NO

Total baptized membership of the new assembly:

Monthly average of the new Assembly's income:

Does the new assembly have a place of worship? YES NO

Has the Regional Committee (present region/network) made a recommendation to the National Leadership Forum regarding this Specialized Ministry? YES NO

If not, please attach a recommendation from the Regional Committee.

If the Specialized Ministry does not involve the creation of a new assembly, how will the ministry operate?

We, the undersigned representatives of the statutory body of the church to which the applicant as an AFM pastor will be accountable, certify that the information supplied is correct.

(Depending on the applicability: Complete one or both information blocks below.)

**ASSEMBLY:
Presiding Pastor**

Name:

Signature:

**REGION:
Regional Leader**

Name:

Signature:

Assembly Secretary / Administrator

Name:

Signature:

Regional Secretary / Administrator

Name:

Signature:

Date :