

LIVING FAITH WORLD MINISTRIES, INC.

ADVANCEMENT APPLICATION

I am applying for Apostle Past	r ordination as: or Prophet D	Evangelist Teac	cher Minister
Current License/Title:		License ID#:	
Name			
(last)	(first)	(middle)	(maiden name)
Date of Birth	Driver's License #		SS#
Street Address			
City/State/Zip			
Home Phone ()	Cell Phone ()
Fax Number ()	E-mail Address	
Church Name			Senior Pastor \square yes \square no
Church Address			
Mailing Address (if d	lifferent)		
City/State/Zip			
Church Phone ()	_Church Website Ad	dress
Church E-mail Addr	ess		
I certified that all stand all the requi	•		I have read and do under-
**Please enclose admini	stration cost of \$100.0	0 payable to Living Fait	h World Ministries.
Signature			Date