

Name of fellowship, organization, and/or denomination in which you were ordained:

Are you a duly consecrated bishop? Yes No. If no, briefly explain below how you came to assume the title.

If yes, indicate date of consecration: _____

Name of the Organization: _____

Organization Address: _____

Chief Consecrator's full name, church, phone and e-mail address:

What is your highest level of education obtained: High School College Graduate
 Doctorate Seminary/ Bible College

Did you earn a: degree? Name of degree _____

certificate? Name of certificate(s) _____

Signature

Date

**** Please submit copies of your ordination and consecration certificates with this application via fax 614-299-2469 within 48-72 hours after completion. Thank you.**