

INSTITUTIONAL CHAPLAINCY
(Hospital, Hospice, Corrections, Police, Fire, etc.)
APPLICATION FOR ECCLESIASTICAL CERTIFICATION

Send to:

Rev. Robert M. Green, Official Endorsing Agent
Full Gospel Fellowship of Churches and Ministers International, Inc.
PO Box 15061
Washington, DC 20003
Phone: (301) 324-1980

Position applying for or Organization seeking membership with:

Name and mailing address that Certification/Endorsement/Approval is to be sent to:

Name: _____ Social Security Number: _____

Mailing Address: _____

Telephone Numbers - Home _____ Cell _____

E-mail Address: _____ Date of Birth: _____ Age: _____

Marital Status: Single ___ Married ___ Separated ___ Divorced ___

Name of Spouse: _____ Spouse's Date of Birth: _____

Children	<u>Name (s)</u>	<u>Date of Birth</u>
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Other Dependents: _____