

The Pentecostal Assemblies of Canada

DIVORCED AND REMARRIED CREDENTIAL APPLICATION

Dear Applicant,

Thank you for applying for ministerial credentials with The Pentecostal Assemblies of Canada.

Enclosed, you will find a supplementary application which requests various aspects of information. This CONFIDENTIAL information will assist us in understanding your life and ministry journey after divorce and/or remarriage. Our overall purpose for collecting information is to assess your spiritual, emotional and relational qualities for credential leadership following a divorce and/or remarriage.

After all questions have been fully answered, this application should be returned to the **National Credential Review Committee**, care of the General Secretary Treasurer, The Pentecostal Assemblies of Canada, 2450 Milltower Court, **Mississauga**, **ON L5N 5Z6**. This and any other application forms must be completed prior to an interview being scheduled with the National Credentials Review Committee, who will make final recommendation on each application to the General Executive.

FINAL CHECK LIST Application form (completed, signed and enclosed) Fee of \$75.00 (enclosed) **Note: \$25 is non-refundable should application be refused** Send reference form to each referee (they are to return it to the International Office directly) Legal decree(s) of divorce (copy enclosed) Current marriage certificate (copy enclosed) Verification of former spouse(s) unfaithfulness/remarriage/common law union (copy enclosed) or enclosed affidavit completed, signed and witnessed.

QUALIFICATIONS FOR DIVORCED AND REMARRIED NEW APPLICANT

QUALIFICATION INFORMATION

- 10.2.1 An applicant who has never been married or who is widowed and who wishes to marry a divorced person whose former spouse is still living, or an applicant who has been divorced and remarried with a former spouse still living, or an applicant who is currently married to a spouse who has a former spouse still living, may qualify for credentials when the following conditions exist:
 - 10.2.1.1 The former spouse, of either the credential applicant or of the applicant's current spouse, has committed porneia as defined in the General Constitution and By-Laws Article 5.9.1 and determined by one or more of the following means:
 - **10.2.1.1.1** A district hearing committee has found the former credentialed spouse guilty in the process of dealing with charges related to *porneia*.
 - **10.2.1.1.2** A secular court has found the former spouse guilty of a legal offense related to sexual misconduct which may be interpreted by a credential committee of The Pentecostal Assemblies of Canada as *porneia*.
 - **10.2.1.1.3** A certificate of marriage, or other legal marital status documents, provides evidence that the former spouse has remarried subsequent to the divorce from the credential applicant or the applicant's current spouse.
 - **10.2.1.1.4** Evidence demonstrates that the former spouse has been a partner in a common law marriage, as defined by provincial or federal legislation, subsequent to the divorce from the credential applicant or the applicant's current spouse.
 - **10.2.1.1.5** If the previous means of evidence are not available, consideration may be given to an affidavit witnessed by two signatories, or a notary public or commissioner of oaths, affirming that the applicant's former spouse has committed porneia.
 - **10.2.1.2** A minimum period of five years has elapsed since the later date of the following events:
 - **10.2.1.2.1** The date the current marriage took place.
 - **10.2.1.2.2** The date the former spouse committed *porneia* as determined by one (1) or more of the means listed above in By-Law 10.2.1.1.
 - **10.2.1.3** The individual has provided acceptable evidence in an application form, personal interview, and through the testimony of references to the National Credentials Review Committee that he/she is currently a partner in a marriage relationship where faithfulness has been clearly demonstrated for a minimum period of five (5) years.

DIVORCE AND REMARRIED CREDENTIAL APPLICATION

Please PRINT all responses.

Note: If there has been more than one previous marriage please make a duplicate copy of this form for each marriage and divorce.

CREDENTIAL INFORMATION				
Are you: applying for ministerial credentials transferring, please indicate denomination/organization: Indicate the credential for which you are applying: Ordained Licensed Minister Received	nsferring from anothe	r denomin □ Ministr		
GENERAL INFORMATION				
		Ge	ender: □	Last
Street Address:	Phone: Home ()		
City:	Work ()		
Province: Postal Code:	Cell ()		
Birth date (M/D/Y):	Citizen (Country):			
•	Province and Countr	y:		
APPLICANT'S CURRENT SPOUSE / FIANCÉE				
				following:
Is the former spouse of your current spouse/fiancée remar	ried or living in a comi	mon-law re	lationsh	p?
		☐ Yes	□ No	□ N/A
Is your current spouse/fiancée widowed? ☐ Yes ☐ No If yes, please indicate the date of death:	□ N/A			□ N/A
•				□ N/A
If yes, please indicate the date of death:				
If yes, please indicate the date of death: APPLICANT'S FORMER SPOUSE	erial Credentials, please		ne followi	
If yes, please indicate the date of death: APPLICANT'S FORMER SPOUSE you answered "yes" to question 3(d) in the Application for Minister	erial Credentials, please	complete tl	ne followin	ng:
	Are you:	Are you: applying for ministerial credentials transferring from another if transferring, please indicate denomination/organization: Indicate the credential for which you are applying: Ordained Licensed Minister Recognition of Ministry District of Applicant: GENERAL INFORMATION Full name (as should appear on certificate): First Initial Email Address: Phone: Home (If transferring, please indicate denomination/organization: Indicate the credential for which you are applying: Ordained Licensed Minister Recognition of Ministry Ministry District of Applicant: GENERAL INFORMATION Full name (as should appear on certificate): Email Address: Ge Street Address: Phone: Home (Are you: applying for ministerial credentials transferring from another denomination/org If transferring, please indicate denomination/organization: Indicate the credential for which you are applying: Ordained Licensed Minister Recognition of Ministry Ministry Related District of Applicant: General Initial Email Address: Gender: Street Address: Phone: Home (

•	ase complete a separate form in reference to the appouse(s) of your current spouse or fiancée (as applicable) acée (if applicable).				
	Full name of applicant's former spouse:				
	First Full name of applicant's spouse's former spouse:		Initial		Las
J1	Tun name of applicant 3 spouse 3 former spouse.	First	Initial		Las
b)	Date of former marriage: Month Day		f Marriage:		
		Year			
C)	How long after the marriage did you separate?				
d)	Date(s) of separation:				
D	ate From:	Date To:			
)	Reason for separation:				
)	In a brief statement, indicate the reasons for the bre	eakup of the marr	iage.		
g)	Harry manus times a district mass to		lvice?	□ Yes 	□ No

h)	Who petitioned the court for the divorce? $\ \square$ Yes $\ \square$ Spouse
	If you petitioned for the termination of your former marriage, state your reasons:
	If your spouse petitioned for the termination of your former marriage, state your understanding of the reasons:
i)	Date of petition: (M/D/Y): Name of Court:
j)	
"	Date of divorce granted (M/D/Y): Location of Court:
No	te: Attach a copy of the legal decree of divorce.
k)	As relational and parental responsibilities may affect ministry, define your current relationship with your former
K)	spouse and outline what parenting responsibilities you currently fulfill.
I)	As financial issues can affect ministry, comment on the outcome of property settlement, alimony, and child
,	support from the divorce proceedings:
6.	WAIVERS
SP	OUSAL WAIVER
l de	eclare that to the best of my knowledge all of the foregoing information is correct and true, and further, recognizing that
	information on the Divorced & Remarried Reference Forms remains confidential between the referee and the National
	edentials Review Committee of PAOC, I, the undersigned, hereby voluntarily waive any right or privilege to inspect or allenge the content expressed by the referees whose names are provided on this Application.
Sig	nature of Current Spouse: Date:

APPLICANT'S WAIVER

Recognizing that the information on the Divorced & Remarried Reference Forms remains confidential between the referee and the National Credentials Review Committee of PAOC, I, the undersigned, hereby voluntarily waive any right or privilege to inspect or challenge the content expressed by those whose names I provide.

I declare that to the best of my knowledge all of the foregoing information is correct and true, and further agree to abide by the commitments made in this application.

Further, I hereby give my consent to PAOC to use and retain all personal information contained in the credential application, reference letters or forms completed on my behalf, and any other information necessary to obtain credentials.

I agree that, if my application is successful, all personal information provided as part of the credential process will become part of the permanent records of PAOC (It is our practice to destroy incomplete or unsuccessful applications after two years).

I understand and agree that, if my application is successful, I will receive electronic and hard-copy communication from PAOC and my district office.

Signature of Applicant:	Date:	

7. REFERENCES

It is important that the people listed as references know you well enough, for at least five (5) years to answer such questions as: "What observations would you make on the positive aspects of the applicants present marriage?" and "What evidence have you noted related to commitment and faithfulness of the applicant to his / her spouse?"

<u>Note</u>: Reference forms are to be forwarded by you. Referees are to return completed forms directly to the International office.

	Name		
Senior / Lead	Street Address		
Pastor	City	Province	Postal Code
	Phone	Email	

	Name		
Family Member	Street Address		
railing Member	City	Province	Postal Code
	Phone	Email	

	Name		
Lay Leader	Street Address		
Lay Leauei	City	Province	Postal Code
	Phone	Email	



The Pentecostal Assemblies of Canada (PAOC) DIVORCED & REMARRIED REFERENCE

(Please copy as needed.)

Аp	plicant's Name:
Re	ference Name:
Re	ference Address:
Re	ference Phone:
opi and ret Mi	e above applicant is applying for ministerial credentials with The Pentecostal Assemblies of Canada as a person affected divorce and remarriage . We understand you are acquainted with the applicant and able to express a trustworthy inion regarding the applicant's qualifications to fill the sacred trust of a minister of the Gospel. We value your judgment d appreciate your cooperation. Thank you for taking the time to complete this form as fully as possible. Please curn it to the International Office, Attn: General Secretary Treasurer/Clergy Records, 2450 Milltower Court ssissauga ON L5N 5Z6). The authorization and release signatures of the applicant and spouse are on file at the national ice. These guarantee that the applicant will not be aware of your response.
1.	a. How well do you know the applicant? ☐ Friend ☐ Acquaintance ☐ Pastorally ☐ Professionally
	b. Are you related to the applicant? ☐ Yes ☐ No
	c. How long have you known the applicant?
	d. Date of last meaningful contact:
2.	How would you describe the applicant's current marriage?
	☐ Adjusted ☐ Well Adjusted ☐ Very Well Adjusted ☐ Strained ☐ Very Strained ☐ Don't know
Ple	ease comment:
3.	In your observation, has the applicant demonstrated marital faithfulness for a minimum of 5 years? ☐ Yes ☐ Questionable ☐ No ☐ Don't know
PΙε	ease comment:
4.	How would you describe the applicant in terms of his/her personal conduct following his/her divorce? (if applicable)
5.	How would you describe the applicant's spiritual maturity? Very Not Very Don't know Maturity 1
Div	vorce and Remarried Credential Application 7

Na	me of Current Spouse:						
6.	a. How well have you	known the app	licant's spouse	?			
	☐ Friend ☐ Acquain	tance \square Pa	storally 🗆 Pr	ofessionally			
	b. Are you related to t	he applicant's	spouse?	☐ Yes ☐ N	lo		
7.	In your observation, h	as the applicar	nt's spouse dem	nonstrated marit	tal faithfulness	for a minimum	of 5 years?
	☐ Yes ☐ Questiona	able 🗆 No	☐ Don't Know				
Ple	ease comment:						
8.	How would you descri	be the applicar	nt's spouse in te	erms of his/her i	personal condu	ct following hi	s/her
o.	divorce? (if applicable		ic o opouse in k	A HISTORY	ser somar somar		3/101
9.	How would you describ	Very	-	-		-	Don't know
	Maturity	□ 1	□ 2	□ 3	□ 4	□ 5	
PIE	ease add additional comm	ents nere:					
Sig	gned:			_ Dated:			
			ne Pentecostal As eneral Secretary 2450 Millto Mississ	return to: semblies of Cana Freasurer/Clergy ower Court auga ON 15Z6			

Divorce and Remarried Credential Application

AFFIDAVIT for Divorced & Remarried Credential Applicant and/or spouse of applicant

NOTE: It is the applicant's responsibility to provide verifiable written evidence that their former spouse has committed porneia by the means outlined in By-Law 10.2.1. Only if this evidence is not available, and you are willing to submit an affidavit, consideration may be given to the affidavit provided below. If you choose to submit the affidavit, you need to understand that if your former spouse were to challenge the accuracy of the statement you are making, you could be found guilty of libel. If applicable, the applicant's current spouse must also meet the criteria outlined in By-Law 10.2.1.

The verifiable written evidence or consideration that may be given to the affidavit must affirm porneia, as defined in the General Constitution and By-Laws Article 5.9.1, on the part of your former spouse. The former spouse's porneia must have occurred prior to your remarriage.

		, , <u></u>	[name of app	of the
City of	in the	Province of		
OO SOLEMNLY DECLARE THAT I. I was married on the			,	(day/month/year)
to		[name of form	er spouse], at the City	of
in the Province of		I was not pre	eviously married.	
2. Pursuant to a Decree Absolute	dated the	day of		(day/month/yea
and issued from		[name	e of Court] on the	day of
,(day/month/year) a	at the City of	, in th	e Province of	
I was divorced from				[name of former spouse].
☐ b. I am aware that my former sp	oouse remarried on or	around		(date).
☐ b. I am aware that my former sp☐ c. I am aware that my former sp				
☐ c. I am aware that my former sp	oouse is living in a com	nmon-law relati	onship as of	(date).
☐ c. I am aware that my former sp AND I make this solemn Declarational if made under oath.	oouse is living in a com	nmon-law relation	onship as ofe, and knowing that it i	(date). s of the same force and effec
☐ c. I am aware that my former sp AND I make this solemn Declaration as if made under oath. DECLARED at the City of	oouse is living in a com	nmon-law relation	onship as of e, and knowing that it i 	s of the same force and effect
☐ c. I am aware that my former sp AND I make this solemn Declaration as if made under oath. DECLARED at the City of	oouse is living in a com	nmon-law relation	onship as of e, and knowing that it i 	s of the same force and effect
☐ c. I am aware that my former sp AND I make this solemn Declaration as if made under oath. DECLARED at the City of	n conscientiously belie	nmon-law relation	onship as of e, and knowing that it i 	s of the same force and effect
□ c. I am aware that my former spann Declaration as if made under oath. DECLARED at the City of	n conscientiously belief	nmon-law relations relations it to be trued and the several controls and the several controls are several controls and the several controls are several cont	e, and knowing that it i	gnature of applicant] A.D. 20
	n conscientiously belief	nmon-law relations relations it to be trued and the several controls and the several controls are several controls and the several controls are several cont	e, and knowing that it i	gnature of applicant] A.D. 20
□ c. I am aware that my former spann Declaration as if made under oath. DECLARED at the City of In the Province of	n conscientiously belief	nmon-law relations relations it to be trued and the several controls and the several controls are several controls and the several controls are several cont	e, and knowing that it i	gnature of applicant] A.D. 20
□ c. I am aware that my former spann Declaration as if made under oath. DECLARED at the City of In the Province of	n conscientiously belief, Canal	nmon-law relations relations it to be trued and the several controls and the several controls are several controls and the several controls are several cont	e, and knowing that it i	gnature of applicant] A.D. 20 Anada.

□ \$7	5.00 Fee enclosed	
□ Re	erences sent out (minimum 3)	
□ Inf	ormation on applicant's divorce:	
	Name of former spouse:	
	Date of first marriage:	
	Date of separation:	
	Date divorce granted:	
	Evidence of porneia (approx. date):	
	If more than one former marriage, please include the information for each marriage	in order
	Name of former spouse:	
	Date of second marriage:	
	Date of separation:	
	Date divorce granted:	
	Evidence of porneia (approx. date):	
□ Inf	ormation on applicant's spouse's divorce (if applicable):	
	Name of former spouse:	
	Date of first marriage:	
	Date of separation:	
	Date divorce granted:	
	Evidence of porneia (approx. date):	
	If more than one former marriage, please include the information for each marriage	in order
	Name of former spouse:	
	Date of second marriage:	
	Date of separation:	
	Date divorce granted:	
	Evidence of porneia (approx. date):	