

**APPLICATION TO BEGIN A NEW CHURCH**  
(Please Print or Type)

TEXAS NORTH AMERICAN MISSIONS  
UNITED PENTECOSTAL CHURCH, INTL.  
4109 S. First  
LUFKIN, TX 75901

Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Social Security # \_\_\_\_\_

Pastor of Applicant \_\_\_\_\_

I desire to open a new work in \_\_\_\_\_

Why are you interested in this city? \_\_\_\_\_

Population \_\_\_\_\_ Main industry \_\_\_\_\_

Is this a growing area? \_\_\_\_\_ Please describe \_\_\_\_\_

Are you acquainted with any U. P. C. people in this city? \_\_\_\_\_ yes \_\_\_\_\_ no

What is your current Ministerial status? \_\_\_\_\_ Local \_\_\_\_\_ General \_\_\_\_\_ Ordained

How long have you been in the Ministry? \_\_\_\_\_ Give a brief history of your Ministry \_\_\_\_\_

Pastorial \_\_\_\_\_ years: Evangelist \_\_\_\_\_ years: Assistant \_\_\_\_\_ years: Other \_\_\_\_\_

Have you won any souls during the past two years outside of your pulpit Ministry? \_\_\_\_\_

How Many? \_\_\_\_\_; What method do you recommend? Bible studies/Tracts/Other

Are you married? \_\_\_\_\_ yes \_\_\_\_\_ no: If married, list the names and Date of Birth of all your children living with you at this time, if any.

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_\_\_

Are you a cooperating member of the Texas District? \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, what Section? \_\_\_\_\_: If no, what District? \_\_\_\_\_

What will be the means of your income while bringing in this work? \_\_\_\_\_

Have you ever begun a North American Missions work before? \_\_\_\_\_ yes \_\_\_\_\_ no: If so,

When? \_\_\_\_\_ Where? \_\_\_\_\_

What was the status of this work when you left? \_\_\_\_\_

If approved, when do you plan to begin? \_\_\_\_\_ Mo. \_\_\_\_\_ Year

Are you willing to affiliate this work with the U. P. C. I. \_\_\_\_\_ yes \_\_\_\_\_ no

If not, please explain why \_\_\_\_\_

What is the nearest United Pentecostal Church to your North American Missions Project?

- A. Name of Church \_\_\_\_\_ City \_\_\_\_\_  
Pastor's Name \_\_\_\_\_ Approx. Distance \_\_\_\_\_
- B. Name of Church \_\_\_\_\_ City \_\_\_\_\_  
Pastor's Name \_\_\_\_\_ Approx. Distance \_\_\_\_\_

Have you read Article XII, Section 14, 15, & 16, in the U.P.C.I. Church Manual? \_\_\_\_\_

Do you accept this and are you willing to fulfill this obligation? \_\_\_\_\_

Are you willing to stay with the New Work for a period of not less than 1 year from the date you begin services? \_\_\_\_\_ (For a more effective North American Missions work, we recommend 3 years). If for any reason you find it necessary to leave prior to that time, do you agree to notify the Presbyter and NAM Director at least 30 days prior to your leaving? \_\_\_\_\_

What do you preach as the Bible requirement for Salvation? \_\_\_\_\_

What do you teach about the Bible's standard of Holiness? \_\_\_\_\_

What approach do you take in presenting this to new converts? \_\_\_\_\_

Do you cooperate with your District NAM giving plan? \_\_\_\_\_ yes \_\_\_\_\_ no

If you give through a local church other than your own Pastorate, what is the approximate amount you give monthly? \_\_\_\_\_

Give 3 references:

- A. Minister  
Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_
- B. Banking  
Officer's Name \_\_\_\_\_ Bank \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- C. Personal (Other than family member)  
Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Please note: In order to be accepted for processing, this application must be completed and submitted to the District Secretary, with copies to the District NAM Director and the Presbyter of the Section in which the New Work will be located.

This application cannot be accepted until all information is complete including the attached financial statement, and requirements met.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**PERSONAL FINANCIAL STATEMENT:** (To be sent to the District Secretary only)

Car #1: Make and year \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
Market value \_\_\_\_\_ Balance owed \_\_\_\_\_

Car #2 Make and year \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
Market Value \_\_\_\_\_ Balance owed \_\_\_\_\_

Home: Total value \_\_\_\_\_ Monthly payment \_\_\_\_\_  
Loan Balance \_\_\_\_\_

Furniture:  
Total value \_\_\_\_\_ Monthly payment \_\_\_\_\_  
Balance owed \_\_\_\_\_

Doctor & Medical:  
Amount owed \_\_\_\_\_ Monthly payment \_\_\_\_\_

Credit Cards:  
Total owed \_\_\_\_\_ Total Monthly payment \_\_\_\_\_

Personal loans:  
A. \_\_\_\_\_ Amount \_\_\_\_\_ Payment \_\_\_\_\_  
B. \_\_\_\_\_ Amount \_\_\_\_\_ Payment \_\_\_\_\_  
C. \_\_\_\_\_ Amount \_\_\_\_\_ Payment \_\_\_\_\_

Have you ever declared Bankruptcy? \_\_\_\_\_ If yes, Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you current with all of your payments? \_\_\_\_\_ If not, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby authorize the District board to request a credit reference check in my name if they deem it necessary.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Application approved \_\_\_\_\_ Date \_\_\_\_\_  
Application rejected \_\_\_\_\_ Date \_\_\_\_\_

By action of the Texas District Board on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
District Secretary

*Texas District*  
UNITED PENTECOSTAL CHURCH

*Reaching Unreached Cities*

Information

&

APPLICATION

