Covenant Brethren Church

Ministerial Fact Sheet and Affirmation Statement

(For candidates seeking credentials)

Application for Licensing (or) O	rdination
Please mail or email the Minister Fact Sheet and the Background Check Form to: Jim Nolt, 330 Yummerdall Road, Lititz, PA 17543 Email: jimnolt@covenantbrethren.org	
Full Name (First Middle Last)	
Date of Birth	
Mailing Address	
Phone	
Spouse's Name	Years Married
Current Minister's Credential(s) I	Held
	(provide a copy)
Years of Service in Set-Apart Min	istry
Presently Serving (Church or other min	nistry)
Ministerial Training	
Date of Last Ethics Training	
Faith of the Covenant Brethren	n that I fully embrace the Statement of Church (CBC) and will support the e best of my ability in every aspect of
(Signature)	(Date)

(For Office Use Only) Reviewed By ______ Date ____

COVENANT BRETHREN CHURCH

503 Morgantown Avenue, Suite 125 Fairmont, West Virginia 26554 304-534-8010

contactcbc@covenantbrethren.org

Minister Background Check Form

The Covenant Brethren Church Executive Board requires a background check be executed for all ministers serving in the CBC. The background check is not intended in any way to intimidate but is necessary to protect the Church as a whole from possible concerns. Thank you for your service to the CBC.

There are two ways to complete your background check. Please check which method you are using. 1. _____Recommended. Fill it out yourself online. You will be sent a link via email to enter your information online. Name_____email:_____ Fill out the information below, detach, and mail (to keep your SSN secure do not email the form) to Jim Nolt our Legal Sub-committee chair and Executive Board Member. *Pennsylvania residents are required to complete a Child Abuse Registry check as part of the background check. If you already have this completed, please forward me a copy in order to complete your background check. If you do not, a link will be emailed to you with a code. You will have to follow the instructions to go to the PA state website, enter the code and complete the information. Please mail or email the Minister Fact Sheet and the Background Check Form to: Jim Nolt, 330 Yummerdall Road, Lititz, PA 17543 Email: jimnolt@covenantbrethren.org Today's Date: _____ Name: First ______Middle _____Last _____ Home Address Road _____ State Zip Social Security #_____ Date of Birth_____ Email_____ By signing this document, I give permission for Covenant Brethren Church to initiate a background check. Signature: