## Church of God Ministries INTER-ASSEMBLY TRANSFER

revised\_4/1/2010

Minister's name:		CONs ID:
*If using a Church address Minister's new address:	, please include the church's name to comply with US	SPS delivery regulations.*
Commissioned? Licensed? Ordained?	□YES       □NO       Date Commissioned:         □YES       □NO       Date Licensed:         □YES       □NO       Date Ordained:	
Sending Assembly: Church Left: (if applicable)		Assembly ID#Position:
Receiving Assembly: New Church: (if applicable)		Assembly ID#Position:
Please mark the response that best reflects your knowledge of this minister in these areas:		
This minister was actively involved in local community ministries.		
This minister was actively involved in district or assembly ministries.   YES  NO  UNKNOWN		
The minister held office in district or assembly during his/her tenure.   \[ \begin{align*} YES & \sum NO & \sum UNKNOWN \end{align*} \]		
This minister is currently in good standing with sending assembly.		
This minister has been subject to an investigation that resulted in action or discipline taken by sending assembly. $\square YES \square NO \square UNKNOWN$		
Additional Comments:		
During approval process time: If the minister's status was marked "needs transfer" it should now be changed to: approved not approved provisional		
ASSEMBLY CREDENTIA	L CHAIRPERSON INFORMATION:	Date:
Credentials Chairperson verifying this information:		
1. Receive wri	tten, signed request from minister to tran	sfer credentials file.
2. File a copy of this document in your assembly files.		
3. Send a copy	to: Credentials Services Church of God Ministries PO Box 2420 Anderson IN 46018-2420	
4. Send the original document along with the complete minister's file to the receiving state assembly office or credentials chair. (See yearbook for address)		

For office use only: Date scanned to Data Services \_\_\_\_\_ Current notes \_\_\_\_\_