

Request for the Credential Application: First Credential

Southern California District Council Assemblies of God
17951 Cowan, Irvine, CA 92614 • 949-252-8400 • Fax: 949-252-8435 • Email: general@socalag.org

I have read the information regarding the Credential Application Process and I hereby request an application for Ministerial Credentials with the Southern California District Council of the Assemblies of God.

Please send the application to the following address:

(Please Print)

Name: _____

Address: _____

City: _____ Zip: _____

Phone: (Home) _____ (Cell) _____

Email: _____

English is not my primary language;

My primary language is: _____

Applicant's Signature: _____

Please mail this form to:

SoCal Assemblies of God
ATTN: Credentials
17951 Cowan
Irvine, CA 92614-6000

DISTRICT OFFICE USE ONLY

Request Received: _____

Official Application Mailed: _____