



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.

## QUALIFICATION INFORMATION

1. Can you verify that your former spouse and/or your spouses' former spouse has committed *porneia*, which is understood as marital unfaithfulness involving adultery, homosexuality, or incest?  
 Yes    No
2. Based on the requirements outlined in the General Constitution & By-Laws 10.2.1, please explain what steps you have taken to obtain verifiable, written evidence (ie: a copy of the spouse's remarriage certificate) that your former spouse(s) and/or your current spouse's former spouse(s) were unfaithful during the marriage and/or have remarried or lived common law prior to your remarriage (attach additional pages if needed):

### QUALIFICATIONS FOR DIVORCED AND REMARRIED NEW APPLICANT

**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.

## 1. CREDENTIAL INFORMATION

Date of Application: \_\_\_\_\_

Are you:  applying for ministerial credentials  transferring from another denomination/organization

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: \_\_\_\_\_

## 2. GENERAL INFORMATION

a) Full name (as should appear on certificate): \_\_\_\_\_  
First Initial Last

b) Email Address: \_\_\_\_\_ Gender:  M  F

c) Street Address: \_\_\_\_\_ Phone: Home ( \_\_\_\_\_ ) \_\_\_\_\_

City: \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_

d) Birth date (M/D/Y): \_\_\_\_\_ Citizen (Country): \_\_\_\_\_  
Month Day Year

e) Birthplace: \_\_\_\_\_ Province and Country: \_\_\_\_\_

## 3. APPLICANT'S CURRENT SPOUSE / FIANCÉE

If you answered "yes" to question 3(c) or 3(e) in the *Application for Ministerial Credentials*, please complete the following:

a) Name of Current Spouse/fiancée: \_\_\_\_\_

b) Is the former spouse of your current spouse/fiancée remarried or living in a common-law relationship?  
 Yes  No

c) Is your current spouse/fiancée widowed?  Yes  No  
If yes, please indicate the date of death: \_\_\_\_\_

## 4. APPLICANT'S FORMER SPOUSE

If you answered "yes" to question 3(d) in the *Application for Ministerial Credentials*, please complete the following:

a) Is your former spouse remarried or living in a common-law relationship?  Yes  No

b) If yes, how long has your former spouse been remarried or living common-law? \_\_\_\_\_

c) Are you widowed?  Yes  No If yes, please indicate the date of death: \_\_\_\_\_





## 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?"

**Note:** Reference forms are to be forwarded by you. Referees are to return completed forms directly to the International office.

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

<b>Family Member</b>	<b>Name</b>		
	<b>Street Address</b>		
	<b>City</b>	<b>Province</b>	<b>Postal Code</b>
	<b>Phone</b>	<b>Email</b>	

<b>Lay Leader</b>	<b>Name</b>		
	<b>Street Address</b>		
	<b>City</b>	<b>Province</b>	<b>Postal Code</b>
	<b>Phone</b>	<b>Email</b>	



Applicant's Name: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Reference Address: \_\_\_\_\_

Reference Phone: \_\_\_\_\_

The above applicant is applying for ministerial credentials with The Pentecostal Assemblies of Canada **as a person affected by divorce and remarriage**. We understand you are acquainted with the applicant and able to express a trustworthy opinion regarding the applicant's qualifications to fill the sacred trust of a minister of the Gospel. We value your judgment and appreciate your cooperation. **Thank you for taking the time to complete this form as fully as possible. Please return it to the International Office, Attn: General Secretary Treasurer/Clergy Records, 2450 Milltower Court Mississauga ON L5N 5Z6**. The authorization and release signatures of the applicant and spouse are on file at the national office. 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

Please comment:

3. In your observation, has the applicant demonstrated marital faithfulness for a minimum of 5 years?

- Yes  Questionable  No  Don't know

Please 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?

- |                 |                            |                            |                            |                            |                            |                 |                          |
|-----------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------|--------------------------|
|                 | <b>Very</b>                |                            |                            |                            |                            | <b>Not Very</b> | <b>Don't know</b>        |
| <b>Maturity</b> | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |                 | <input type="checkbox"/> |

*Please turn over...*

Name of Current Spouse: \_\_\_\_\_

6. a. How well have you known the applicant's spouse?

- Friend     Acquaintance     Pastorally     Professionally

b. Are you related to the applicant's spouse?     Yes     No

7. In your observation, has the applicant's spouse demonstrated marital faithfulness for a minimum of 5 years?

- Yes     Questionable     No     Don't Know

Please comment:

8. How would you describe the applicant's spouse in terms of his/her personal conduct following his/her divorce? (if applicable)

9. How would you describe the spouse's spiritual maturity?

- |                 |                            |                            |                            |                            |                            |                          |
|-----------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|--------------------------|
| <b>Very</b>     |                            |                            |                            |                            | <b>Not Very</b>            | <b>Don't know</b>        |
| <b>Maturity</b> | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> |

Please add additional comments here:

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Please return to:  
The Pentecostal Assemblies of Canada  
Attn: General Secretary Treasurer/Clergy Records  
2450 Milltower Court  
Mississauga ON  
L5N 5Z6



**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.

**IN THE MATTER** of my application for ministerial credentials, I, \_\_\_\_\_ of the  
City of \_\_\_\_\_ in the Province of \_\_\_\_\_, Canada  
[name of applicant]

**DO SOLEMNLY DECLARE THAT:**

1. I was married on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (day/month/year)  
to \_\_\_\_\_ [name of former spouse], at the City of \_\_\_\_\_,  
in the Province of \_\_\_\_\_. I was not previously married.
2. Pursuant to a Decree Absolute dated the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (day/month/year)  
and issued from \_\_\_\_\_ [name of Court] on the \_\_\_\_\_ day of \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_ (day/month/year) at the City of \_\_\_\_\_, in the Province of \_\_\_\_\_,  
I was divorced from \_\_\_\_\_ [name of former spouse].
3. I believe that my former spouse has become involved in a sexual relationship with another person by reason of one or more of the following:  
 a. I believe that my former spouse was involved in *porneia* during our marriage, on or around \_\_\_\_\_ (date), which is understood by the Pentecostal Assemblies of Canada to be marital unfaithfulness involving adultery, homosexuality, or incest.  
 b. I am aware that my former spouse remarried on or around \_\_\_\_\_ (date).  
 c. I am aware that my former spouse is living in a common-law relationship as of \_\_\_\_\_ (date).

AND I make this solemn Declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

DECLARED at the City of \_\_\_\_\_  
[signature of applicant]

in the Province of \_\_\_\_\_, Canada, this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20 \_\_\_\_\_

\_\_\_\_\_  
[signature]

A Commissioner of Oaths/Notary Public in and for the Province of \_\_\_\_\_, Canada.

**OR, IF** witnessed, not notarized:

\_\_\_\_\_  
[signature of first witness]

\_\_\_\_\_  
[signature of second witness]

**Summary Checklist for Divorced & Remarried credential application:**

**\$75.00 Fee enclosed**

**References sent out** (minimum 3)

**Information 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): \_\_\_\_\_

**Information 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): \_\_\_\_\_

**Date of current marriage (min. 5 years): \_\_\_\_\_**