



**Church Of God In Christ, Inc.**  
DIVISION OF LICENSING AND CREDENTIALING  
World Headquarters – Historic Mason Temple  
930 MASON STREET  
MEMPHIS, TENNESSEE 38126

**LICENSING AND CREDENTIALS REQUEST FORM**

**NAME OF PERSON TO RECEIVE LICENSE OR CREDENTIALS**

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ CREDITIAL CARD ID NUMER: \_\_\_\_\_

GENDER:  MALE  FEMALE REQUEST TYPE:  NEW CREDENTIALS  EXISTING CREDENTIALS

**JURISDICTIONAL INFORMATION**

JURISDICTION: \_\_\_\_\_

JURISDICTIONAL BISHOP: \_\_\_\_\_

JURISDICTIONAL SUPERVISOR: \_\_\_\_\_

**CREDENTIALS REQUESTED**

PASTOR  ELDER  MINISTER  APPOINTMENT \_\_\_\_\_  
*List Position*

**OFFICIAL REQUESTING CREDENTIALS Jurisdictional Bishop or Secretary ONLY!**

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

JURISDICTIONAL OFFICE PHONE: (\_\_\_\_\_) \_\_\_\_\_ OFFICE FAX: (\_\_\_\_\_) \_\_\_\_\_

**PLEASE FORWARD ALL INFORMATION VIA EMAIL TO [dlc@cogic.org](mailto:dlc@cogic.org) or by fax at 901-947-9359**  
**\*For any inquiries and additional information please call 901-947-9391 or 901-846-0777\***