



**APPLICATION FOR MEMBERSHIP**

National Secretariat, P.O. Box KN 3217, Kaneshie- Accra, Ghana West Africa  
Tel: +233 (0) 20 186 9756 , www.ncca.org, nationalclergy@gmail.com

**NCCA DEPARTMENTS / CHAMBERS:** Peace Chamber, Council Of Churches, Ordination And Licenciation Commission, Chamber Of Refuge, National Excellence Foundation (NEF), National Association Of Bible And Mission Schools (NABMS).  
**NCCA ECUMENICAL AFFILIATIONS:** Global School Of Clergy (GSC), Christ Council Of Clergy And Churches (CCCC).

**MEMBERSHIP FORMS**

Affix  
Passport  
Picture  
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**PERSONAL INFO**

**Applicant's Name and Phone Number Information**

Last/Family Name: \_\_\_\_\_  
First/Given Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_  
Other Phone: \_\_\_\_\_

**Home Address (Street/State/Country)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Title:**  Mr.  Ms.  Mrs.  Pst.  Rev.  Vr.Rev.  Apst.  
 Bhp.  Dr.  Dean.  Rabbi  Relic  PhD.  Other  
(If other to the above) State? \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**May We Text You:**  Yes  No

**Gender:**  Male  Female

**Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Example: JAN/05/1987)

**Country of Citizenship:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Place Of Birth:** \_\_\_\_\_

**Primary Language Spoken:** \_\_\_\_\_

**Primary Religious Affiliation:**

Orthodox  Pentecostal  Charismatic  
 Protestant  Baptist  Apostolic  
 Other (specify): \_\_\_\_\_

**I Will Study My Course In:** \_\_\_\_\_

**Marital Status**  Single  Married  Separated  
 Divorced  Remarried  Widow or Widower

(If Married) Spouse's Name: \_\_\_\_\_ (If Children) Name & Age: \_\_\_\_\_

**Family Information:**

Father's Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**MINISTRY / AFFILIATION**

I have ministerial credential with (Name): \_\_\_\_\_

Country: \_\_\_\_\_ District: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of church you attend: \_\_\_\_\_ Role / Obligation: \_\_\_\_\_

Mode Of Ministerial Obligation:  Full-Time  Part-Time Date obtained: \_\_\_\_\_

(If Part-Time) Why?: \_\_\_\_\_

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Number of Church Workers: .....

Pastors(in Full-Time Ministry): .....  
(Please indicate visible sign post leading to location)

Pastors (Unpaid or Tent Ministry) :.....Auxiliary Staff (Paid) .....

Total Number of Church Members:.....

Adult (Local-Ghana):.....

Youth / Children (Local-Ghana): .....

Adult (External): .....

Youth / Children ( External): .....

Name of two referees and contact

.....  
(Name Of Clergy) (Signature) (Contact)

.....  
(Church Administrator) (Signature) (Contact)

Current Names and Contact of Church Officers (i.e. National Executive / Church Board) / Attach A Copy

Constitution and Tenets of Faith (Please attach 3 Copies)

Organisational Structure (Please Attach a Copy)

Certificate of Registration (Please Attach a Copy)

A brief history of your Church/ Ministry (Please Use Separate Sheet)

A recommendation letter from a Pioneer Clergy who knows you well.

What Social Development Project (eg. Schools, Hospitals, Street Kids, etc.) are you involved currently.

Identify Ministerial Rank: ..... Years Of Ministerial Experience: .....

Do you hold any position at your present church? .....

Do you hold any occupation along with ministerial obligation: .....

### MINISTERIAL DECLARATION / PASTORAL STANDARDS

The following are standards of ethics that a set to ensure the smooth run of ministry by all members of the council to ensure and promote the kingdom growth and salvation gospel of our Lord God.

1. Clergy will ensure that their conduct at all times reflects the fact that they are in the service of Jesus Christ.
2. Clergy will not relate the name of the council with any commercial activities, political etc. that may cause NCCA to be held in disrepute.
3. Clergy are expected to faithfully honour their obligation to prayerfully and financially support NCCA.
4. Clergy are to be messengers, watchmen, and stewards of the Lord; which the Church is called upon to proclaim afresh in each generation.
5. Clergy will avoid acts of a sinful nature.
6. Clergy will seek to grow through regular prayer and study.
7. Clergy will not use their position for personal gain or to exploit those they serve.

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8. Clergy are obliged to submit to and accept the discipline of the Council and give due respect to those in authority.
9. Clergy will be diligent in prayer, in reading Holy Scripture and earnestly pray for the Holy Spirit.
10. Clergy will at all times seek the greatest good of those they serve. This includes referring people to appropriate place, when problem is beyond the professional competency of the clergy person.
11. Clergy will respectfully submit to the authority of the Board and Executive Presbytery of NCCA.
12. Clergy are to maintain the confidentiality of those they counsel and in serve in accordance with Scriptural principles with which the clergy person serves.
13. Clergy must set the Good Shepherd always before them as the pattern of their calling.
14. Clergy are required to strive to fashion their own life and that of their household according to the way of Christ.
15. Clergy are to promote unity, peace and love among all Christian people.
16. Clergy are to care for the poor, the needy, the sick, and all who are in trouble.
17. Clergy must remember the greatness of the trust committed unto their charge that they cannot bear the weight of this ministry in their own strength, but only by the grace and power of God.
18. Clergy are to Teach, Admonish, Feed, Provide for the Lord's family.
19. Clergy are to lead God's people in prayer and worship, serve them with joy and build them up in faith.
20. Clergy are to call their hearers to repentance in Christ's name absolve, and declare forgiveness of sins.

**DECLARATION / UNDERTAKEN**

I ..... hereby sign this undertaken to abide or adhere to the rules and regulations spelt the constitution of the NCCA and to abide by the Holy Bible as the supreme Word of God that graces perfection, eternity and salvation of the soul.

..... of..... , .....

*Signature* *Date*

**STATEMENT OF FAITH**

I understand all items submitted to NCCA are part of the application process; and credible.  
 I grant permission to NCCA to verify the information provided on this application. I acknowledge and give approval for a criminal background check to completed during the application process. I hereby state that all the information contained on this application is correct and true. If NCCA finds that any of the information contained on this application is false, it will be grounds for immediate cancellation and revocation.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

*Be sure to review your application before sending. Applications will not be processed until all required documents are received.*

**OFFICIAL USE ONLY**

Authorized By:	Signature:	Date:
Approved:                      Remarks:	Not Approved:	Remarks:
ML. No:	Membership No:	

\_\_\_\_\_  
 Signature (General Secretary)

\_\_\_\_\_  
 Date:

**Approval Stamp Here**

**NCCA CHAMBERS & AFFILIATES**



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