

# E.A.G.L.E.S. Fellowship of Pastors & Leaders

515 Virginia Avenue  
Petersburg, VA

**Bishop Darren L. Gay, Sr.,** *Presiding Prelate*



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TYPE or PRINT Clearly

## I. PERSONAL DATA

Mr./Mrs./Ms. \_\_\_\_\_  
Name (last) (first) (middle) (maiden name)

Present Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone :( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_ @ \_\_\_\_\_  
( ) \_\_\_\_\_

Sex: Male Female Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Marital Status: Single \*Married \*Engaged Divorced Separated

Current Employment \_\_\_\_\_

## II. CHURCH /FELLOWSHIP AFFILIATION

### Name of Church Membership:

\_\_\_\_\_ ( ) \_\_\_\_\_  
Name of Church Phone  
Address \_\_\_\_\_

### Name of Fellowship Membership:

\_\_\_\_\_ ( ) \_\_\_\_\_  
Name of Fellowship Phone  
Address \_\_\_\_\_

## III. MINISTRY

Are you presently or have you been licensed or ordained? YES (List Below) NO

Organization/Denomination	Date	Type (Minister, Elder, Pastor, Bishop)

1. List the area(s) of the five-fold ministry, according to **Ephesians 4:11**, to which you are called by God:

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

2. What ministry gifts/spiritual gifts do you have to offer the **E.A.G.L.E.S.** Fellowship? \_\_\_\_\_

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

**IV. PERSONAL/SPIRITUAL LIFE GOALS**

1. What are your Goals for Ministry?

Immediate (6-9 months) \_\_\_\_\_

Short Term (1-5 years) \_\_\_\_\_

Long Term (5-10 years) \_\_\_\_\_

3. What do you expect to receive from the **E.A.G.L.E.S.** Fellowship? \_\_\_\_\_

4. What needs does your ministry have at this time? \_\_\_\_\_

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This application will be received and held in confidence. Only those people with a need to know will review it. I grant **E.A.G.L.E.S. Fellowship of Pastors & Leaders** and its delegated leadership permission to verify the information provided in this application.

I hereby state that all of the information contained in this application is correct and true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

**Date Received:** \_\_\_\_\_

**Reviewed by:**

\_\_\_\_\_  
**Bishop Darren L. Gay, Sr., Presiding Prelate**

\_\_\_\_\_  
**Date**

**Registration Fee: \$300.00**

**Paid** \_\_\_\_\_ **Date** \_\_\_\_\_ **Received by** \_\_\_\_\_