



**Congregational Christian Churches in Canada**

**P. O. Box 463 Simcoe, ON N3Y 0E6**

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# **MINISTERIAL QUESTIONNAIRE**

**2022**

## 2022 MINISTERIAL QUESTIONNAIRE

\*\*\* This Report is for Ministerial Activity in the Year 2021

\*\*\* Deadline for Return: Postmarked by February 28, 2022

### Please read the following paragraphs carefully:

We appreciate your diligence in filling out this form. The satisfactory return of this questionnaire is required for renewal of all Ministerial Ordained, Ministerial Ordained, Licensed Ministers and Lay Ministers – see By-Law 1 Section 5.8(vi); 7.3(iii); 8.3(iii).

Failure to fully complete and return this questionnaire together with your credential renewal fee by **February 28, 2022** will result in subsequent follow-up from the Credentials Committee and the possible loss of credentials – see By-Law 1 Section 10.4(viii), (x).

A **\$200.00** credential renewal fee is required for Ministerial Ordained, Licensed Minister and Lay Minister (not retired credential holders). Questionnaires and renewal fees post-marked **AFTER February 28<sup>th</sup>** will result in an additional **\$200.00** late administration fee.

Last Name: \_\_\_\_\_

Given Names: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Clergy Marriage Registration # \_\_\_\_\_

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

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Mailing Address (if different from Street Address): \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### **Present Classification of Credentials:**

Ministerial Ordained

Licensed Minister

Lay Minister

\*\*\* If you are a **Lay Minister**, you must also complete the section at the bottom of page 7 of this Questionnaire and include an annual ***Letter of Endorsement*** from your local church. \*\*\*

1. Please provide the name of the Church you are currently pastoring or attending:

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov.: \_\_\_\_\_

2. Length of time you have been ministering there: \_\_\_\_\_

3. Your Position:

Senior/Lead Pastor Part-Time

Executive Pastor Full-Time

Associate Pastor

Assistant Pastor

Youth Pastor

Children's Pastor

Evangelist

Missionary

Interim Pastor

Other: \_\_\_\_\_

4. It is now a mandatory requirement for the issuing of your credentials that the church in which you are currently employed carries proper sexual abuse/malpractice insurance coverage for you. Confirmation of your current insurance coverage must be on file at National Office.

➤ **Do you have insurance?** Yes    No

**Please send a current copy of your church's insurance page/s that outline the name of your insurance provider and their sexual abuse/malpractice insurance coverage with your completed questionnaire.**

**If you are not currently ministering in a church, please send a copy of your insurance provider's name and their coverages with this Questionnaire.**

➤ **Have you attached a copy of this insurance coverage?** Yes    No

5. Are you in full agreement with the:
- |  |     |    |
|--|-----|----|
| A. Articles of the 4C's?                     | Yes | No |
| B. Current By-Law 1 and Policies as amended? | Yes | No |
| Will you comply with A and B?                | Yes | No |

**If you have answered NO to any of the above, please fully explain:**

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|--|-----|----|
| 6. Have you presented the truths about Christian stewardship and tithing to your people?   | Yes | No |
| 7. Have you encouraged your church to support the ministry of the 4C's and their 5% annual allocation of their general operating income for the support of the National Church's Budget?   | Yes | No |
| 8. By-Law 1, Section 10.4(i to iv), and Policy 1 sets forth the conditions by which credential holders must be held accountable for their moral, ethical and doctrinal integrity. In light of this, please answer the following questions:   |     |    |
| a. Are you currently involved in a relationship, questionable activity or addiction which if not properly addressed, will harm or destroy your ministry?   | Yes | No |
| If you answered "yes" to the above are you receiving, or have you received, any professional counselling/therapy at this present time or during this past year?  | Yes | No |
| b. During the past year have you officiated at a same sex marriage, been involved with any criminal activity participated in or have you been formally accused of any sexual misconduct such as adultery, child sexual/physical abuse, pornography, homosexual/lesbian activity, all of which are inconsistent and at odds with our Articles, By-Law 1 and Policies? | Yes | No |
| c. Are there any past or pending legal actions which might incriminate you in the future?  | Yes | No |
| If "Yes", describe in detail: _____  |     |    |
| _____  |     |    |
| _____  |     |    |
| _____  |     |    |

9. Have you made it your objective to be supportive of the CCCC and its aim to promote fellowship? – see By-Law 1 Sections 5.8(i-iii); 7.3(i-ii); 8.3(i-iii). This is a requirement to keep your credentials in good standing. Please indicate which events you have attended in the past year:

- |   |     |    |
|---|-----|----|
| a) Annual National Conference                   | Yes | No |
| b) National Pastor’s Video Teleconference Calls | Yes | No |

If you have answered “No” to **a)**, **or b)** for this past year, you are now required to attach a letter to this Questionnaire addressed to the Chair of the Credentials Committee explaining your reasons for not being able to attend these events. See By-Law 1 Section 5.8(ii); 7.3(i), 8.3(i), and recommendations adopted at the Annual Meeting in 2018.

Have you enclosed your note/letter of explanation with this Questionnaire?                      Yes        No

10. What courses or seminars have you attended this past year for your professional development? Please specify:

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11. Are there specific areas of need in your life and/or in your church that the National Pastor could help you address (i.e. Personal Counselling, Making Disciples, Growing Healthy Churches, Evangelism, Vision Planning, Core Values, Salary discussion with your leadership, Special Workshops, Conflict Resolution Training for your church, Local Church Board Training, Leadership Development or Sexual Abuse Protection Plan, etc.)?

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12. As your National Pastor co-ordinates his visits and speaking schedule for the upcoming year, are there any dates or special occasions for which you would like him to be the guest speaker at your Church?

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13. Do you understand the role of your National Board of Directors?                      Yes        No

If No, would you like a member of the National Board to contact you?

Yes        No

15. How can the National Office and National Board serve you and the church better?

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14. Are you seeking a change from your current place of ministry or service? Yes      No  
If yes, what type of ministry are you seeking?

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**Ministerial Ordained and Licensed Ministers – please sign below:**

Have you enclosed your **\$200.00** credential renewal fee? Yes      No

Are you returning this form postmarked after the February 28<sup>th</sup>? Yes      No

**If you answered YES, you are required to submit a further \$200.00 late registration fee**

Have you enclosed this fee? Yes      No

**Signature:** \_\_\_\_\_

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

**FOR LAY MINISTERS ONLY**

**Your Credential requires annual renewal.** See By-Law 1: Sec: 7.1(v); 8.1(vi). Please complete the following:

I hereby request that my credential standing as \_\_\_\_\_ be renewed for the next 12 months. I have maintained my membership and accountability relationship as set out in By-Law 1: Sections 7.3(i-iii) and Section 8.3(i-iii).

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

**Have you enclosed your Letter of Endorsement from your Church Board? Yes      No**