



**Please send this to:**

Virginia State Office  
P.O. Box 158  
Troutville, VA 24175

## Deaconess Application

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

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

Date of Birth: \_\_\_\_\_ Married  Single  Divorced  Divorced/Remarried

*(If divorced or divorced/remarried, please explain in separate writing.)*

When were you converted? \_\_\_\_\_ Sanctified \_\_\_\_\_ Holy Ghost \_\_\_\_\_ Have you been baptized in water? \_\_\_\_\_ If so, when and by whom \_\_\_\_\_

How long have you been a member of the church? \_\_\_\_\_ Do you sense a definite call into a ministry of service to the local church? \_\_\_\_\_ If so, what area?

Will you make yourself available to the pastor and the congregation to serve in areas of your gifting which would allow the pastor time for prayer and fasting? \_\_\_\_\_ Are you willing to undergo a background check? \_\_\_\_\_ What capacity of church service do you believe you are best equipped to serve in \_\_\_\_\_

Do you have organizational skills? \_\_\_\_\_ Do you have administrative skills? \_\_\_\_\_

Do you understand financial matters? \_\_\_\_\_ Do you have maintenance skills? \_\_\_\_\_

Will your husband serve alongside you in ministry? \_\_\_\_\_ Are you daily in prayer? \_\_\_\_\_

Are you leading your family in personal family worship? \_\_\_\_\_ Are you being enriched daily from the Word of God? \_\_\_\_\_ Are you a good steward in tithing and giving? \_\_\_\_\_

Are you willing to be equipped for ministry through study courses and ministry enrichment sessions provided by both the Pastor and Regional Office? \_\_\_\_\_ Are you willing to stay connected to the Regional Office through your reporting? \_\_\_\_\_

Please write in the space provided below why you would like to be a Deacon. Should you need more space, use the back of this page.

(A copy of this application should be kept in the local church files.)