



MT. SINAI WORLD OUTREACH MINISTRIES

Bishop Terry McCaskill, Sr. Pastor

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Church Name	Church Number	Cell Phone:	
Church Address			
How many years have you served in ministry?		What are your ministry gifts?	
How many years have you served as pastor?		What are your weak areas in ministry?	
What is your denomination?		What are your strong areas in ministry?	

IF SPACE IS NEEDED TO ANSWER THE ABOVE QUESTIONS PLEASE ATTACH AN ADDITIONAL PAGE.

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

DISCLAIMER AND SIGNATURE	
I acknowledge that the information an application for covenant partnership. I agree to operate my life, and ministry under the ethics and integrity of God. Bishop Terry McCaskill will serve as my spiritual covering.	
Signature	Date

Additional Instructions:

1. Please provide a copy of your license and Ordination. Please provide a copy of your church being registered with the state.
2. Please send us a mission and doctrine statement of your church. Please send a copy of your biography and picture

Please print this application and fill it out. Please give us at least 10 days to respond to your application. If you do not hear anything within 10 days, please call 864.646.8797 and ask for the bookkeeper/personal assistant for Bishop Terry McCaskill.