

Accreditation Process Application Form

For Non-Endorsed Ministers

Accreditation is a process that ensures all Ministers in CCVT meet an appropriate level of personal, spiritual, and leadership formation and are supported by participation in regular external supervision and professional development. If you are unsure about whether you need to apply for accreditation, please contact CCVT on 03 9488 8800 or read CCVT's [Accreditation and Endorsement of People in Ministry Policy](#) and [Frequently Asked Questions](#).

Affiliated Church or Agency's Application for Accreditation

To be completed by the church or agency, not the minister.

Please accept the enclosed application for accreditation for:

Name: _____

Church/Organisation: _____

Date started

Position Title: _____

in role: _____

Type of position: Paid or Volunteer, Full-time or Part-time, Retired

If part-time or retired, number of hours per week: _____

Email: _____

Daytime Phone: _____

Mobile: _____

Postal Address: _____

We confirm that the applicant is a Minister at our Church/Agency;

Or we confirm that the applicant is an active member of our Church/Agency and are in Ministry external to our Church/Agency (e.g. a chaplain, agreed secondment, Intentional Interim Ministry)

We agree to support the applicant in participating in regular external supervision.

We agree to support the applicant in participating in professional development.

Any other relevant information: _____

If completing the form electronically please type your full name below to sign:

Signed by: _____

Date: _____

Position/Title: _____

Church/Agency: _____

Minister's Application for Entering Accreditation Process

To be completed by the minister.

Personal Details

Home Address:

Name of Spouse (if applicable):

Position Title, Place of Ministry:

What year were you previously Accredited/Endorsed/Ordained (if applicable) – include denomination:

Any other relevant information:

Please inform us on what you have completed so far for the accreditation process:

Accreditation Requirement	No	Yes	Details
Completed Safe Church Awareness Workshop	<input type="checkbox"/>	<input type="checkbox"/>	Date and Location:
Completed Staying Healthy in Ministry Seminar	<input type="checkbox"/>	<input type="checkbox"/>	Date and Location:
Completed workshop or unit on history and identity of Churches of Christ	<input type="checkbox"/>	<input type="checkbox"/>	Unit name, date completed:
Completed training in theological and spiritual formation (please include unit details on page 4)	<input type="checkbox"/>	<input type="checkbox"/>	
Attached copy of National Police Check (less than 3 years old)	<input type="checkbox"/>	<input type="checkbox"/>	
Have a Working With Children/Vulnerable People Check	<input type="checkbox"/>	<input type="checkbox"/>	Number and expiry date:
Attend CCVT accreditation interview	<input type="checkbox"/>	<input type="checkbox"/>	
Commit to participate in regular external supervision	<input type="checkbox"/>	<input type="checkbox"/>	Existing Supervisor's name and organisation:
Commit to participate in 40 hours per year (or pro rata for part-time) of Professional Development	<input type="checkbox"/>	<input type="checkbox"/>	
Attached digital photo for use on my Accreditation card	<input type="checkbox"/>	<input type="checkbox"/>	
If retired: I am available for casual, interim, or itinerant ministry.	<input type="checkbox"/>	<input type="checkbox"/>	

Statement of Compliance

Please indicate your acceptance of the [CCVT Code of Ethics for Ministers](#) and your suitability for ministry in CCVT by checking the boxes below and signing.

- I have read and understood the CCVT Code of Ethics for Ministers and I agree to always uphold the minimum standards of behaviour described in it.
- I understand that disciplinary measures may be taken by the church if I am found to be in breach of the Code of Ethics. This will include reporting to legal or statutory authorities where relevant.
- I have never been disqualified or dis-endorsed as a leader and I have not done anything likely to reflect adversely on my character or whether I am a fit and proper person.
- I am not aware of any matter or circumstance that might affect my suitability to be appointed as a leader.
- No disciplinary action of any sort has ever been taken against me by a church denomination, local congregation, professional association or educational/training institution and there are no complaints pending against me before such bodies.
- I have never had a civil suit brought against me in relation to my employment in ministry or other professional occupation.
- I have never been charged with the police in relation to my employment in ministry or other professional occupation and I do not have any charges pending.
- I consent to my affiliated church/agency and/or Churches of Christ in Victoria and Tasmania Inc making inquiries of, and exchanging information with, other internal and external organisations as to whether any matter in respect of alleged misconduct relates to me.
- I certify that to the best of my knowledge, the information in this statement is correct.

The reason I am unable to check one of the boxes above is:

If completing the form electronically please type your full name below to sign:

Signed:

Name:

Date:

Past Ministry Experience

Describe your past experience in ministry, including churches or organisations served, positions held, and experience gained:

Other Employment History:

Education for Ministry

Describe your education for ministry; include the name and address of the college or institution, dates enrolled, and list the qualifications completed or in progress:

Please attach copies of relevant certificates or academic transcripts (including the names of units completed) and any other relevant information.

Personal Faith Statement/Sense of Call and Commitment to Ministry

Describe your sense of call (vocation) and commitment to ministry:

Relationship with CCVT

Describe your response to [Affinity:2](#) including the appendices:

This information describes what it means to belong to CCVT and is available at churchesofchrist.org.au.

Referees

It is preferred that your referees include one from your previous place of ministry, one from your current place of ministry and a personal referee.

Name: _____
Position: _____
Organisation: _____
Phone: _____ Mobile: _____
Address: _____
Email: _____

•••

Name: _____
Position: _____
Organisation: _____
Phone: _____ Mobile: _____
Address: _____
Email: _____

•••

Name: _____
Position: _____
Organisation: _____
Phone: _____ Mobile: _____
Address: _____
Email: _____

Signature

Please accept my application for accreditation. The information included on this form is true and correct to the best of my knowledge at the date of signing.

If completing the form electronically please type your full name below to sign:

Signed: _____
Name: _____ Date: _____

Send To

Email to

leadership@churchesofchrist.org.au

Subject line: "Confidential – Accreditation Application"

Or, Mail to

Accreditation Processing Officer
Churches of Christ in Victoria and Tasmania
PO Box 5302
South Melbourne Vic 3205
Australia

What happens next?

- CCVT processes your application and identifies any outstanding requirements.
- Your referees will be contacted.
- You will be invited to come to an accreditation interview. You are encouraged to bring an elder or equivalent leader from your church/agency for support.
- The accreditation interview may identify some outstanding requirements.
- Once any outstanding requirements have been addressed, you will be Accredited by the CCVT Board or their delegate and issued with an Accreditation card.

If you have any questions or concerns please contact CCVT on 03 9488 8800.