## Professional Training and Standards

Powered by NACBA

## **Application for Certification**

(To be submitted the calendar year of certification prior to Feb 1st with \$100 member or \$400 non-member application fee)

To be filled out online, printed and mailed to The Church Network, 12655 N. Central Expy, #950, Dallas, TX 75243 or faxed to 972.699.7617

Title	First Name	Middle Name	Last Name
Church/Organization			
Home Address			
City / St / Zip			
Telephone Work	Home		Cell
E-mail			
Highest Level of Education			
Vocational History: (Past Ten years, most recent first)		Specify Positions of Leadership held in religious organizations:	
Positions held in the The Church Network (if applicable):  Local Chapter  National			
Please email application to	: National office of The Churc	ch Network at info@t	:hechurchnetwork.com
Balance of \$100.00 member	or \$400 non-member certific	ation fee should acco	ompany this application.
This fee, paid to The Church	Network, is for certification by	The Church Network	only.
Name on Card		Exp.	CHECK ENCLOSED
Credit Card	CVC C	ode	
**** Email current picture (jpg or png) to info@thechurchnetwork.com			
Signature Copyright of completed project submitted to The Church Network remains with the author. In submitting the project for certification, the author licenses The Church Network to use the project as a benefit of membership and to sell copies to non-members. (Initial)			