



**The School of Theology
of the Primitive Methodist Church**

[6-2006]

Permission to Contact References ~ ~ ~ Application Package (Elder)

Signature: I acknowledge the right of, and grant permission to the Primitive Methodist Church in the USA to fully examine and check any pertinent information about those applying for the pastoral ministry within their Conference. I hereby grant permission to this School of Theology to gather and confirm references for and about myself. I further grant them permission to ask any references that I supply to suggest secondary references, and to contact these secondary references in regard to a recommendation about my qualifications, temperament and abilities to serve as a pastor in this denomination. I further understand that they will attempt to verify previous employment and the circumstances of separation. I hereby authorize the references, secondary references and employers listed in this application to disclose whatever information they may have regarding my character and fitness for the job for which I have applied. Furthermore, I waive any rights to confidentiality. I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion.

Signature

Date

Signature of Witness

Date

I have asked the following to act as a reference:

Church-Related

Name, address and telephone number:

Work-Related

Name, address and telephone number:

Community-Related

Name, address and telephone number: