

## Application for Local Pastor License Central Texas Conference

This form is to be used to request a Local Pastor License upon first appointment as a local pastor in the Central Texas Conference. Licenses are issued by the Office of the Bishop. Those applying for a license must meet all the requirements for appointment as a local pastor in the Central Texas Conference.

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(Please type or print full name as it should appear on the license)

First Appointment as Local Pastor \_\_\_\_\_

Date of Appointment \_\_\_\_\_ District \_\_\_\_\_

Please show date and place of successful completion of:

Criminal Background Check	Date: _____	District: _____
Reference Check	Date: _____	District: _____
Psychological Assessment	Date: _____	District : _____
Certified as Candidate by dCOM	Date: _____	District : _____
Local Pastor Licensing School	Date: _____	Conference: _____
Orientation to Ministry	Date: _____	Conference: _____
Sexual Ethics Training Completed	Date: _____	Conference: _____

Mailing address

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(P. O. Box or Street)

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(City, State, ZIP)

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

I certify the above information to be correct and complete.

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(Signature of Local Pastor)

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(Signature of District Superintendent)

**Send original to:**  
Office of the Bishop  
Central Texas Conference  
[bettyalexander@ctcumc.org](mailto:bettyalexander@ctcumc.org)

**Send copy to:**  
Board of Ordained Ministry  
[kathyezell@ctcumc.org](mailto:kathyezell@ctcumc.org)