

Northern California Conference  
Application for Emeritus Credentials

Date \_\_\_\_\_

Telephone \_\_\_\_\_

Name of applicant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credentials applied for \_\_\_\_\_

Date of retirement \_\_\_\_\_

Last employer \_\_\_\_\_

Type of credentials last held \_\_\_\_\_

Present membership held in \_\_\_\_\_ Church

Applicant's signature \_\_\_\_\_  
(Signature of applicant)

Recommended by present pastor \_\_\_\_\_  
(Signature of pastor)

Recommended by a Northern California Conference administrator \_\_\_\_\_  
\_\_\_\_\_  
(Signature of administrator)