

Document: Antioch School of Church Planting and Leadership Development - #1214

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Antioch School of Church Planting and Leadership Development

IMLD & Antioch School - Applicant: Deloryce Bright

Submitted By: Deloryce Bright

Q1. Please enter the following: Name, Address, Phone Numbers, Organization

Client:**Division:****ID#:****Telephone (W):****Telephone (H):****Telephone (C):****Address:****City:****State or Province:****Postal Code:**

Q2. Please enter your email address

delybright@gmail.com

Q3. Gender

Female

Male

Q4. Please add your birthdate (MM/DD/YYYY):

March 8, 1954

Q5. List social security number. Please enter it without dashes or spaces, just numbers.

062449274

Q6. Name of Home Church:

Word of Faith Family Worship Cathedral

Q7. List Country of Citizenship

United States of America

Q8. Marital Status

Married

Widowed/Divorced (more than two years)

Single

Widowed or Divorced (less than two years)

Separated from Spouse

Q9. If married, divorced, separated, or widowed, how long?

divorced 19 years

Q10. If currently married, spouse's name:

n/a

Q11. If currently married, spouse's email address:

n/a

Q12. If currently married, spouse's cell phone number:

n/a

Q13. Please list children's names and ages. If you do not have any please put N/A.
son deceased in 2010 at age 26

Q14. Are you a Word of Faith covenant member (completed all five new member classes)?

Yes
No

Q15. How long have you been a covenant member?

Less than 5 years
More than 5 years

Q16. Residence History

ADDRESS	CITY, STATE	FROM:	TO:
1 - 2362 Salah Circle	City: Douglasville State: Georgia	Month: 12 Day: 23 Year: 2014	Month: 12 Day: 15 Year: 2015
2 - 149 Long Beach Ave	City: Roosevelt State: New York	Month: 11 Day: 15 Year: 2003	Month: 12 Day: 21 Year: 2014

Q17. Are you a consistent tither?

Yes
No

Q18. In how many Word of Faith ministries are you currently serving?

None
1 Ministry
2 Ministries
3 Ministries
4 or more Ministries

Q19. Please provide the following information for up to four (4) ministries (WOF & non-WOF) in which you are/were involved:

Name of Organization	Organization's Address, Zip Code	Length of Service:	Your Position:	Ministry Name/Supervisor Phone Number:	Did You Leave in Good Standing:
Bethel Gospel Tabernacle Inc	Address: 110-25 Guy R Brewer Blvd Jamaica NY Zip Code: 11433	6 or more years	Ministry Leader	Ministry: Ordained Minister/Bishop Roderick Caesar Phone: 7182912676	Left in Good Standing
Bethel Gospel Tabernacle Inc	Address: 110-25 Guy R Brewer Blvd Jamaica NY Zip Code: 11433	6 or more years	Ministry Leader	Ministry: Worship Leader/Bishop Roderick Caesar Phone: 7182912676	Left in Good Standing
Bethel Gospel Tabernacle Inc	Address: 110-25 Guy R Brewer Blvd Jamaica NY Zip Code: 11433	6 or more years	Ministry Servant	Ministry: BBI Bethel Bible Institute Teacher/ Bishop Roderick Caesar Phone: 7182912676	Left in Good Standing

Q20. Have you ever been convicted of a Felony?

Yes
No

Q21. If yes, please explain.

N/A

Q22. Have you ever been convicted of a Misdemeanor?

Yes
No

Q23. If yes, please explain.

N/A

Q24. Have you ever been or received First Offender's status for a crime?

Yes

No

Q25. If yes, please explain.

N/A

Q26. Are you listed on any state

Yes

No

Q27. If answered yes above, please list the states in which you are registered:

States

Q28. Have you ever been addicted to drugs or alcohol?

Yes

No

Q29. Are you currently clean and sober?

Yes

No

Q30. Would you be willing to submit to drug/alcohol testing?

Yes

No

Q31. If not please explain.

N/A

Q32. How many years of ministerial experience (Five-Fold Ministry Service) do you have?

0 to 5 Years

5 to 10 Years

10 Plus Years

Q33. Please describe why you want to be a part of this program. The essay should be at least a total of 250 words. It is best to type the answer in a word processing application like MS Word and then copy and paste in the box below:

I want to be a part of the MIT Program because I have a call on my life to teach the Word of God. I love the Word of God and I love studying His Word. I believe that this program will cause me to go deeper still into the wealth and vastness of God's Word as I have opportunity to be challenged and have discourse with others about The Word. I was a member of my former fellowship for 36 years and had been operating in the gift of teaching in different areas of ministry as a ministry servant. After years of service, my covering pastor appointed me to serve as minister and ministry leader in worship and teaching (in the Bible Institute, Sunday School, New Members, Director in Small Group Ministry). I relocated to Georgia recently, was lead to WOF, and immediately began to seek the Lord regarding my assignment in the fellowship. I want to continue to serve and develop as a servant leader in ministry and I believe that this program will allow me to continue to grow and accomplish the will of God in my life for Kingdom purposes. The past 2-3 years I have struggled with a call to shepherd. I believe that participating in this program, coupled with prayer and mentoring through the program, I will gain clarity as to how to move forward. I believe that God's timing is perfect and that this avenue of training and developing me to serve and answer God's call is a divine appointment. I so appreciate the excellence with which the ministry operates. I believe that connecting with the ministry through this program will further ignite my passion for teaching and set me on the path for what God has for me in this new season.

Q34. Please confirm you are applying for a Certificate of Ministry?

Yes

Q35. Name of Partner Church through which this program is being offered: **Dale C. Bronner Institute of Ministry and Leadership Development (Word of Faith Family Worship Cathedral)**

Yes

Q36. Name of Certified Leader or Partner who is recommending you for this program: **Rev. Courtney Wright**

Yes

Q37. Name of Local Mentors who will provide your personal development assessment: **Word of Faith Staff & Ministry Leaders**

Yes

Q38. First Name, Last Name

Client:Deloryce

Division: Bright

Q39. Have you completed Foundations in Christianity at Word of Faith?

Yes

No

Q40. Have you completed Foundations in Priesthood at Word of Faith?

Yes

No

Q41. Have you ever been ordained or licensed as a pastor or minister?

Yes

No

Q42. By what governing body are you currently licensed and/or ordained?

Bethel Gospel Tabernacle Fellowship International 110-25 Guy R Brewer Blvd Jamaica, New York 11433 Bishop Roderick R Caesar, Pastor

Q43. Are you seeking licensing and/or ordination from MIT?

Yes

No

Q44. Do you have a personal/ministry website? If so, please provide the web address. (Example: <http://www.me.com>)

N/A

Q45. Do you have a Twitter account? If so, please provide it below. (<http://www.twitter.com/yourtwittername>)

N/A

Q46. Do you have a Facebook account? If so, please provide it below. (<http://www.facebook.com/username>)

N/A

Q47. Do you have a LinkedIn account? If so, please provide it below. (<http://www.linkedin.com/username>)

N/A

Q48. Do you have access to a computer for the completion of the MIT coursework?

Yes

No

Q49. Highest level of education?

B A Sociology Duke University

Q50. Name, Location, and Years attended. (High School - College) (From: MM/YYYY-To: MM/YYYY)

SCHOOL'S NAME	SCHOOL'S CITY, STATE	FROM:	TO:	FIELD OF STUDY:	DEGREE/DIPLOMA:
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Q51. Do you have any licenses and/or certifications? (List Name, Date Certified, Expiration for each.)

NAME OF CERTIFICATION	DATE CERTIFIED/LICENSED:	EXPIRATION (IF APPLICABLE):
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Q52. Have you ever worked for the armed forces?

Yes

No

Q53. If you answered yes to question #14, in which branch did you serve? (Ex. AIR FORCE, ARMY, NAVY, MARINES, COAST GUARD, NATIONAL GUARD)

NAME BRANCH OF SERVICE	HIGHEST RANK	DATE ENTERED:	DATE DISCHARGED:	TYPE OF DISCHARGED:	DD214 NUMBER:
1 -		Month: Day: Year:	Month: Day: Year:		

Q54. Describe your work history?

One or two jobs in the last five years

Three jobs in the last five years

Four or more jobs in the last five years
No job in the last five years because of retirement
No job in the last five years because of physical restrictions or mental illness
No job for other reasons

Q55. Work History: Please list the last 10 years.

EMPLOYER'S NAME	EMPLOYER'S CITY, STATE	FROM:	TO:	JOB TITLE:	SUPERVISOR'S NAME/PHONE NUMBER:	DESCRIBE YOUR WORK:	REASON FOR LEAVING (IF APPLICABLE):
61 -	City: State:	Month: Day: Year:	Month: Day: Year:				

Q56. First Name, Last Name

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Q57. Are you active in your community (outside of church activities)?

One or more community involvement(s)

None

Q58. If you indicated community involvement in question #1, we need further information.

NAME OF ORGANIZATION	ORGANIZATION'S CITY, STATE	FROM:	TO:	YOUR POSITION:	SUPERVISOR'S NAME/PHONE NUMBER:	DID YOU LEAVE IN GOOD STANDING:

Q59. First Name, Last Name

Client:Deloryce

Division: Bright

Q60. Are you a baptized Christian believer who has received the Holy Spirit?

Not Sure

Yes

No

Q61. At what age did you become a Christian baptized believer?

18

Q62. Do you believe that the Holy Bible (Old and New Testaments) is the inspired, inerrant and only infallible, authoritative word of God and the final authority in faith and conduct?

Yes

No

Not Sure

Q63. Do you believe there is only one true God, eternally existent and manifested in the triune Godhead, three persons equal in power and purpose and authority: God the Father, God the Son (Jesus Christ) and God the Holy Spirit?

Yes

No

Not Sure

Q64. Do you believe all have sinned and come short of the glory of God and are in need of salvation?

Yes

No

Not Sure

Q65. Do you believe that salvation of mankind comes only by confessing the Lord Jesus Christ and believing that God raised Him from the dead?

Yes

No

Not Sure

Q66. Do you believe in Jesus Christ's bodily resurrection and ascension to the right hand of the Father in heaven?

Yes
No
Not Sure

Q67. Do you believe in the resurrection of the dead to either eternal life with Jesus for the saved or eternal damnation in hell for the unbelieving lost?

Yes
No
Not Sure

Q68. Do you believe in the deity, virgin birth, and perfect and sinless life of Jesus Christ?

Yes
No
Not Sure

Q69. Do you believe in the supernatural work of miracles and healing of Jesus Christ?

Yes
No
Not Sure

Q70. Do you believe in the substitutionary death of Jesus Christ and His bloodshed which atones for sins of the world?

Yes
No
Not Sure

Q71. Do you believe in the personal return of Jesus Christ in power and glory to rapture a mature church?

Yes
No
Not Sure

Q72. Do you believe in the observance of the Eucharist (Holy Communion) and in the ministry and baptism of the Holy Spirit, empowering and enabling the Christian to live a holy life in this present world and to minister as Jesus ministered?

Yes
No
Not Sure

Q73. Check the Five Fold Ministry position to which you have been called.

Prophet
Apostle
Evangelist
Pastor
Teacher
Other

Q74. If you selected Other in the previous question please explain.

n/a

Q75. Have you unconditionally made yourself available for whatever vocation God might want to use you?

Yes
No

Q76. Are you willing to spend the necessary time preparing yourself to be effective in your calling?

Yes
No

Q77. What have you done to prepare yourself for your calling?

prayer, personal study of God's Word, submission to the teaching of my pastor, regular attendance and fellowship with believers, reading

Q78. How many hours per week do you have to devote to a ministerial training and development program?

0-3 Hours
4-6 Hours
7-10 Hours
11-15 Hours

Q79. Type your Full Name:

Deloryce Yvette Bright

Q80. Please type today's date: (MM/DD/YYYY)

12/15/2015

Attachment(s)

Your LifeTime Assesment Chart