

Spanish Eastern District
of the
Assemblies of God

Rev. Rafael Reyes, Superintendent
Rev. Dr. Nicanor González, Liaison
Lic. Eddie Zaldana, DYD
Lic. Jorge Ventura, Asst. DYD
Miss. Mayra Mendoza, DYAO
Miss. Betzalie Colón, DYFO

SEDYOUTHMINISTRIES

P.O. Box 8417
New Haven, CT 06530
www.seduth.com



Leadership Application

Personal Information:

Name: _____ Birth Date: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Home #: () _____ Work #: () _____

E-mail: _____ Mobile #: () _____

What is your present marital status? Single Married Divorced Widowed Date of marriage _____

Have you ever been divorced or had a marriage annulled? Yes No If yes, date _____

Do you or your spouse have a former spouse living? Yes No If yes, please give a brief summary:

Church Information:

Church Name : _____

Pastor's Name : _____ Pastor's Tel #: _____

Address : _____ Pastor's e-mail _____

City : _____ State : _____ Zip: _____

How many years have you been a member of this church? _____

- Have you fully supported and assisted your pastor? Yes No
- Have you been baptized in water? Yes No
- Have you been baptized in the Holy Spirit? Yes No
- Do you hold credentials with the Assemblies of God? Yes No
- If yes, what rank? Ordained Licensed Certified

Please list all skills, talents, and experience you have had in ministry:

Please indicate the area(s) in youth ministry that interest you (check all that apply):

*Bronx, Brooklyn, Columbia, Connecticut, Kentucky/Tennessee, Long Island, Manhattan, North New England, South New England,
North New Jersey, South New Jersey/Delaware, Pennsylvania, Northwest, Ohio, Queens, Upstate*

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- Music Administrative Treasury Worship Speed the Light
 Fine Arts A.I.M. F.I.R.E. Youth Alive
 Other (explain): _____

• Are you willing to work with, promote, and implement the vision of the SED Youth Ministries for your section?

Yes No (if no, explain)

Please provide us with two ministerial references (not including your Pastor):

Name: _____ Phone: (____) _____

Name: _____ Phone: (____) _____

Applicant's Signature

Pastor's Signature

For official use only

This application was: Approved Declined

Comments: _____

Eddie Zaldana

DYD, SED Youth Ministries

Presbyter, _____

Section of _____