## **RELEASE OF INFORMATION**

I hereby authorize the Texas General Assembly of the Church of God to request, receive, maintain, and transfer upon request any and all applications, letters, references, forms, and other information in regards to my licensing, ordination, and ministerial service.

I further give said board permission for all information received to become part of my professional file. I understand that this file is considered permanent and transferable to an appropriate authority on my choice to transfer to the jurisdiction of another assembly.

Print Full Name:		 
Social Security Number:		
Signed:		 
Date Signed:	_	