То	≗ Person ≗ Person
Сс	≗ Person
Всс	≗ Person
Subject	Pastoral Application

То	≗ Person ≗ Person
Сс	≗ Person
Всс	≗ Person
Subject	

Believers Missionary Baptist Church

Senior Pastor Application

PERSONAL INFORMATION

Name Marcus Council Age 59

Gender

		ale emale					
Address	415	Pisgah Church Rd. S	uite 307.		Apt.		
City C	Greensb	oro	State	NC		Zip _	27455
Mobile P	hone	336 - 253-7879	Wor	k Phone	336-375	-1164	
Home Ph	none -		Your preferred	number fo	or calls	336- 3	75-1164
Email Ac	Idress	marc24266@aol.co	om				
Racial/E	thnic B	ackground Black					
GENERA	L FAM	ILY INFORMATION					
Marital S	tatus:						
	Si	arried ingle ivorced lidower lidow					

Date of Marriage 05/16/2015

Spouse's Name Aleitha Council Spouse's Age 50

Children's Names	Ages	Gender	Grade
Lawrence Harrison	30	М	
Devon Harrison	27	М	
Cameron Armwood	26	М	
Breyon Harrison	25	М	

Farrell Crawford

Farrell Crawford Farrell Crawfordseas

Present Church Reset Ministry Center Phone # 336-523-4929

Church Address 455 Gorrell St.

CityGreensboroStateNCZip27406

Church Web Address N/A

MINISTRY CREDENTIALS

Licensed By Word of Life Sanctuary of Worship **Date** 03/02/2022

Ordained By	N/A			Date	
					То
					Cc
					Всс
					Subject
				-	

How to Send this Application: When you have completed the form, click on File in the upper left corner and then click on Email. Send the completed document to bmbcgso25@gmail.com as a PDF.

NOTE: Please also send via email or mail to our P.O. box a resume or bio with your educational background, work history, especially your ministerial and pastoral experience, community service, special awards, and 3-5 references. We must receive all your information on or before August 1, 2025.

ТоВМ	bmbcgso25@GMAIL.COM
Сс	≗ Person
Всс	≗ Person
Subject	