Southeastern California Conference Human Resources Department

Church Membership Verification Form

Legal Name:	
(do not put a nickname)	
Previous/Maiden Name:	
Date of Birth:	
Current Address:	
Church Where Membership is Held:	
Membership by: (Choose only one)	☐ Baptism ☐ Profession of Faith
 If Church is not within SECC, what conference is church located in? 	
Pastor's Name:	
Prior Church Membership:	
Form Completed by:	
Date Form Completed:	
*If your membership is not within SECC please have your church provide a letter of verification stating that you are currently a baptized member in good standing.	
Human Resources Office Use Only:	
Membership Verified by:	
Date Membership Verified:	

Return this form to:

SECC Human Resources Department

P.O. Box 79990, Riverside, CA 92513-1990 humanresources@seccsda.org 951-509-2351 (Phone) 951-509-2395 (fax)

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