



North American Division

# APPLICATION FOR DIVISION STATUS/INDEPENDENT TRANSFER TO THE NORTH AMERICAN DIVISION

### Personal Data

1. Name \_\_\_\_\_  
 Family Name \_\_\_\_\_ Given Names \_\_\_\_\_ Spouse Given Names \_\_\_\_\_ Maiden Name \_\_\_\_\_  
 Children \_\_\_\_\_ Date of Birth \_\_\_\_\_

2. Current Address \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_ Apt. Number \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

3. Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
 Date of Marriage \_\_\_\_\_ Divorced \_\_\_\_\_ Date \_\_\_\_\_  
 Date of entry to US/Canada \_\_\_\_\_

4. Social Security/Insurance # \_\_\_\_\_ US Citizen: Yes No Canadian Citizen: Yes No

5. First Denomination Employer in NAD \_\_\_\_\_  
 Beginning Date of Employment in NAD \_\_\_\_\_

6. Current Employer \_\_\_\_\_  
 Current Position \_\_\_\_\_

### Educational Data

7. List your educational achievements & degrees etc. Give name and address of school and graduation dates.

a. Elementary \_\_\_\_\_  
 b. Secondary \_\_\_\_\_  
 c. College \_\_\_\_\_  
 d. Other \_\_\_\_\_

### Denominational Employment Data prior to coming to North American Division (latest first)

8. Position \_\_\_\_\_ Employing Organization \_\_\_\_\_ Location \_\_\_\_\_ Dates \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(May continue on back)

### 9. EMPLOYER: SEND COPIES OF ORIGINAL SERVICE RECORD & EMPLOYEE ELIGIBILITY VERIFICATION FORM (I-9) TO:

NAD Secretariat – ITR Coordinator  
North American Division  
12501 Old Columbia Pike  
Silver Spring MD 20904-6600 USA

Phone: 301/680-6467  
Fax: 301/680-5076  
E-mail: [angeliqua.kripps@nad.adventist.org](mailto:angeliqua.kripps@nad.adventist.org)