**APPLICATION FOR FACULTY GROUP ASSOCIATION**

**PURPOSE STATEMENT AND DOCTRINAL BASIS**

This form is being submitted to affirm that this faculty gathering/group at this campus is being resourced by the undersigned InterVarsity staff member. This resourcing is being done in such a way that it reflects both the Purpose and Doctrinal Basis of InterVarsity Christian Fellowship/USA®

(hereafter “InterVarsity”), noted below.

[**Purpose Statement**](http://www.intervarsity.org/about/our/our-purpose)

*In response to God's love, grace and truth:* The purpose of InterVarsity Christian Fellowship/USA® is to establish and advance at colleges and universities witnessing communities of students and faculty who follow Jesus as Savior and Lord: growing in love for God, God’s Word, God’s people of every ethnicity and culture and God’s purposes in the world.

**Doctrinal Basis**

Each InterVarsity staff representing a Faculty Network does affirm their agreements with the Doctrinal Basis of InterVarsity Christian Fellowship/USA, which is, as follows:

We believe in:

The only true God, the almighty Creator of all things,

existing eternally in three persons—

Father, Son, and Holy Spirit—full of love and glory.

The unique divine inspiration,

entire trustworthiness

and authority of the Bible.

The value and dignity of all people:

created in God's image to live in love and holiness,

but alienated from God and each other

because of our sin and guilt,

and justly subject to God’s wrath.

Jesus Christ, fully human and fully divine,

who lived as a perfect example,

who assumed the judgment due sinners

by dying in our place,

and who was bodily raised from the dead

and ascended as Savior and Lord.

Justification by God's grace to all who repent

and put their faith in Jesus Christ alone for salvation.

The indwelling presence and transforming power of the Holy Spirit,

who gives to all believers a new life and

a new calling to obedient service.

The unity of all believers in Jesus Christ,

manifest in worshipping and witnessing churches

making disciples throughout the world.

The victorious reign and future personal return of Jesus Christ,

who will judge all people with justice and mercy,

giving over the unrepentant to eternal condemnation

but receiving the redeemed into eternal life.

To God be glory forever.

**INSTRUCTIONS**

1. **COLLEGE/UNIVERSITY INFORMATION** – Fill out the information as requested. Write the complete name of the college/university and your faculty community/groups (no abbreviations, please). The association date entered should be the date that the InterVarsity staff member signs this form.
2. **ASSOCIATION STATUS**

* If this faculty community/group has not been associated with InterVarsity during the past school year, or if you are unsure of the group’s status, check the box indicating an initial association.
* If this faculty community/group has been a group associated with InterVarsity during this past school year, check the box indicating a renewal of the group’s association.

1. **STAFF SECTION**

* Staff should embody InterVarsity’s [**Purpose Statement**](http://www.intervarsity.org/about/our/our-purpose), [**Doctrinal Basis**](http://www.intervarsity.org/about/our/our-doctrinal-basis), the importance of Christian character and lifestyle, and the benefit of group association to the faculty community/group.
* The staff’s first name, last name, zip code, and email must be entered in the appropriate fields for NSC office use purposes.

1. **AREA DIRECTOR SECTION**

* The Area Director’s first name, last name, zip code, and email must be entered in the appropriate fields for NSC office use purposes.

**NOTE: Faculty group association is an annual process. The InterVarsity staff member should send this completed form to their Area Director. Area Directors should electronically sign the completed form and submit one form per associated group to** [**affiliation@intervarsity.org**](mailto:affiliation@intervarsity.org)**.**

**Application for Faculty Group Association**

**Date of Association:** Click here to enter a date.

* + - 1. **COLLEGE/UNIVERSITY INFORMATION**

Name of Faculty Group:

Type of Group: **FACULTY**

Complete Name of College/University:

InterVarsity Region and Area:

* + - 1. **ASSOCIATION STATUS**

I, the below named staff, desire to associate this faculty group with InterVarsity Christian Fellowship/USA®. This association is an indication that I am resourcing the group.

*Please check the box that best applies to your Faculty Group:*

Initial Association

Renewal of Association

* + - 1. **STAFF SECTION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **By signing this, I certify that I am serving as a representative to this Faculty Group.** | **Staff Electronic Signature**  (Name + Zip Code) | | **Date** | **Staff Email Address** |
| I agree |  |  |  |  |

* + - 1. **AREA DIRECTOR APPROVAL**

I have reviewed this application with the InterVarsity staff member and agree with the association of this Faculty Group with InterVarsity.

|  |  |  |  |
| --- | --- | --- | --- |
| **Area Director Electronic Signature**  (Name + Zip Code) | | **Area Director Email Address** | **Date** |
|  |  |  |  |

NOTE: Faculty Group Association is an **annual process**. The InterVarsity staff member should email

this completed form to their Area Director for both initial associations and renewal. Area Directors should

electronically sign the completed form and submit one form per associated group to[**affiliation@intervarsity.org**](mailto:affiliation@intervarsity.org)**.**

Forms are found online at: <http://collegiateministries.intervarsity.org/resource/chapter-recognition-and-affiliation>