

CHILDREN'S MINISTRY APPLICATION

We're excited that you are interested in becoming a part of our Children's Ministry!
Help us to get to know you better by filling out this application and returning it to the Church Office.

This application is to be completed by all applicants for any position in the Children's Ministry. Completing this form will help us provide a safe environment for the children who participate in our programs and use our facilities. We also use this information to provide opportunities for our volunteers to utilize the talents and giftings.

PERSONAL

Name: _____ DOB: _____

Address _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Email _____

Marital status: _____ Number of children: _____

Present employer: _____ Have you been through our membership class? _____

How long have you attended the church? _____ Date of salvation: _____ Baptism: _____

How often can you serve? *(please circle your choice)*

Once a week Every other week Once a month

Indicate ministries you have an interest in: *(please circle your choices)*

Nursery Preschool Kids Church Outreach
Registration Life group childcare Set up/Tear down Most needed

Date you want to begin: _____ Minimum Commitment length: _____

Are you in a Life Group? If yes, which one(s)? _____

Are you involved in other ministries at the church? If yes, which one(s)? _____

CHURCH HISTORY

List other churches you have attended regularly during the past five years:

1. Church name _____ Dates: _____

Pastor's Name: _____ Church Phone: _____

Address _____

2. Church name: _____ Dates: _____

Pastor's Name: _____ Church Phone: _____

Address: _____

If necessary, please use additional sheets of paper to give us all information

EXPERIENCE

List all previous church work involving youth and children:

Church name: _____ Dates: _____

Address: _____

Work performed: _____

List all previous non-church work involving youth and children:

Organization: _____ Dates: _____

Address: _____

Work performed: _____

List any gifts, callings, training, education, or other factors that have prepared you for work with children

INTEREST

Indicate areas of interest: *(please circle areas that apply)*

Lead Teacher	Music	Arts(painting & drawing	Carpentry
Sewing	Crafts	Refreshments	Musicals
Special Education	Writing	Classroom Helper	Audio/Visual
Photography	Medica	Costumes/Clowning	Parties/Games
Fall Festival	Computer	Office Work	Room Decoration
Editing	Bus Driving	Sign Lanuage	Foreign Language
Vacation Bible School	Other _____		

BACKGROUND

Do you have any physical hadicaps or conditions preventing you from performing certain types of activii relating to children's ministry work? If yes, please give details. _____

Have you ever been convicted of a crime other than traffic violations? If yes, please explain. _____

REFERENCES

List two (2) references that you have known for more than a year (other than former employers or relati

Name: _____ Phone: _____

Name _____ Phone: _____

The information contained in this application is correct and complete to the best of my knowledge. I authorize any references or churches listed within, to provide any information and opinions they have regarding my character and fitness to work with children. I release any individual, church, organization, charity, employer, or reference from any and all liability for damage resulting from furnishing such evaluations to you, and I waive my right to inspect references provided on my behalf. Should my application be accepted, I agree to be bound by the constitution, by-laws, and policies of the church and to refrain from unscriptural conduct both at and away from church activities.

Signature _____ Date _____

Witness _____ Date _____