

Calvary Chapel Devine's Ministry Application

Name: _____ Email: _____

Address: _____

City, State, Zip: _____

Cell Phone #:: _____ (Text? Y/N)

Home Phone #: _____ Birthday: _____

How long have you been attending Calvary Chapel Devine

Which ministry are you applying to serve in?

Please provide three References:

How do you know them? _____

Non-Family Reference Name: _____

Phone Number: _____ Email: _____

How do you know them? _____

Non-Family Reference Name: _____

Phone Number: _____ Email: _____

How do you know them? _____

Personal:

Are you married? Yes No

If yes, Spouse Name: _____

Are you separated? Yes No

Do you have any children (names and ages)?

: FOR OFFICE USE:: Live-Scan Approved: ___ References checked: ___ Signed: ___

Experience:

1. Describe your past positions in other ministries. Also list which church or organization these were with. _____

2. What duties did you perform in those positions?

Background:

1. What are your convictions regarding the use of alcohol? Do you now use or have ever, used alcohol in any form?

2. Have you ever been advised to seek psychiatric help? If so, please elaborate.

3. Do you think you are violent person? Yes or No (Circle one)

4. Do you consider your temper a problem? Yes or No (Circle one)

5. Have you ever physically struck anyone in anger? Yes or No (Circle one)

6. Have you ever been accused of any improper conduct towards a child? Yes or No (Circle one)

If so, please explain.

7. Do you struggle with same sex attraction? Yes or No (circle one)

8. If you're currently involved or struggling with pornography or homosexuality and/or are using recreational drugs such as marijuana? please explain:

Christian Character:

1. Detail how and when you became a follower of Christ and what that means to you.

2. In what church were you saved?

3. Have you been water baptized? Yes or No (Circle one) If so, when?

4. Would you say you have lived consistently for Christ?

5. Have you read and agree with Calvary Chapel Devine’s doctrinal statement of faith and Calvary Chapel Distinctives by Chuck Smith or Listened to the Teachings.

Please explain if you don’t agree and what issue?

Criminal Background:

1. Have you ever been charged or convicted with committing a crime? Yes or No (Circle one)

If so, please explain.

2. Has your driver’s license ever been suspended? Yes or No (Circle one)

If so, please explain.

Church Background:

1. How important is faithful church attendance to you? Why do you say that?

2. How long have you been attending our church? Have you attended a church before ours?

Which one & what was your reason for leaving?

Conclusion:

1. Is there anything that you would like to ask us?

2. Is there anything we can do to better help you understand your ministry?

3. Is there anything you feel we should have asked but have not?

4. Is there anything else about yourself that you would like to share with us?

5. Why do you want to serve in the Ministry you chose? _____

(Please read and initial each statement.)

: FOR OFFICE USE:: Live-Scan Approved: ___ References checked: ___ Signed: ___

____ The information contained in this application is correct to the best of my knowledge.

____ I authorize references or churches listed in this application to provide information (including opinions) they may have regarding my character and fitness for working with children.

____ I waive any right I may have to inspect references provided on my behalf

____ Should my application be accepted, I agree to be bound by the policies of this church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

____ I further state that I have carefully read the forgoing release and know the content there of and I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

Applicant Name: _____

Applicant's Signature: _____

Date: _____

: FOR OFFICE USE.: Live-Scan Approved: ____ References checked: ____ Signed: ____