



Trinity Baptist Church

Holding Forth the Word of Life

Children's & Youth Ministries Staff

Application

PART 1 – PERSONAL PROFILE

Name: _____ Date of birth: _____
(First) (Last)

Mailing Address: _____
(Street/PO Box) (City/State) (Zip)

How long have you lived at this address? _____ If less than 7 years, please list previous address: _____

Home phone: _____ Can you receive calls at work? Phone: _____ NO

Best time to reach me: _____ E-mail: _____

Single Married Remarried/Blended Family Spouse's Name: _____

Parent(s) name if you are under 18 years old: _____

Children (name & age): _____

Employer: _____ Position: _____

Do you have a current CPR Certification? Yes No If yes, when does it expire? _____

Do you have a current 1st Aid Certification? Yes No If yes, when does it expire? _____

PART 2 – MINISTRY HISTORY & PROFILE

Do you consider Trinity Baptist you home church? Yes No

How long have you attended Trinity Baptist? _____

Do you regularly attend another church Yes No If yes, where? _____

Are you a born-again Christian? Yes No or I'm not sure?

If yes, briefly summarize how you came to know Christ as you Savior and the present condition of your spiritual life. _____

Please describe your previous and/or current ministry involvement at Trinity Baptist. _____

Describe your previous experience with children.

Location

Position

Why do you want to get involved in Children's or youth Ministry? _____

What do you consider to be your strengths? _____

Are there any physical or personal concerns that might impede your full participation in the program?

In which area(s) do you prefer to work? Behind the scenes Registration

Infants/Crawlers Toddlers 2 year olds 3 year olds 4 year olds

Kindergartner's 1st-2nd grade 3rd-4th grade 5th-6th grade

Jr. High Sr. High College/career

PART 3 – DOCTRINAL BELIEFS

Briefly state your beliefs on the following. This is not a test of your Bible knowledge, but we do want to know what you believe regarding these key doctrines:

What do you believe about the Bible? _____

What is your understanding of the Trinity? _____

How do you know that you are saved? _____

Why should a person be baptized? _____

Why is the resurrection of Christ important? _____

Do you believe that Jesus is coming again? Yes No Explain: _____

Are there any doctrinal areas where you are in disagreement with the Senior Pastor or the church's doctrinal statement? If yes, please describe: _____

What role does prayer play in your life? _____

PART 4 – PERSONAL REFERENCES & CRIMINAL HISTORY

Please provide two references, including a former employer or volunteer organization reference.

1. _____ Phone: _____
(Name)

2. _____ Phone: _____
(Name)

Please provide the name of a ministry leader in this church who is familiar with you.

_____ Phone: _____
(Name)

Have you been accused, rightly or wrongly, of child abuse or neglect? Yes No

Please explain: _____

Have you in the recent past or are you currently using any illegal substances or alcohol?

Yes No Please explain: _____

Have you been arrested or convicted for any criminal act more serious than a traffic violation?

Yes No If yes, explain: _____

Reference Liability Release & Waiver

Before contacting any of your references, we are required to have the applicant sign a liability release and waiver. This enables Trinity Baptist to conduct the reference checks without fear of liability.

“In consideration of the recent and evaluation of this application by Trinity Baptist Church, I agree and represent that: The information contained in this application is correct to the best of my knowledge. I authorize any references, or any other person or organization, whether or not identified in this application, to give you any information (including opinions) regarding my character and fitness for volunteer service. I hereby release any individual, church, denominational agency or official, reference, or any other person or organization, including record custodians, both collectively and individually, and whether or not identified in this application, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization, excepting only the communication of knowingly false information. I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.

This is a legally binding release, which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of the authorization shall be as valid as the original. I further understand that a criminal records check may be conducted on me, and I consent to any such check.

I waive any right that I may have to inspect any information provided about me by any person or organization described above. I have read and understand the above provisions, and agree to them.

Signature

Date

Name (please print)

Driver's License Number

Parent's Signature (if applicant is under age of 18 years)

Date

FOR OFFICE USE ONLY

Interviewer: _____

Comments: _____

References Checked: _____ Date: _____

References Checked: _____ Date: _____

References Checked: _____ Date: _____