

Arrow Heights Baptist Church

Student Ministry

Volunteer Application

General Information

name: _____ today's date: _____

address: _____

date of birth: _____ home phone: _____

occupation: _____ work phone: _____

employer: _____ cell phone: _____

Work Status: ___ part time ___ full time ___ student

Marital Status: ___ single ___ married ___ divorced

Education

high school: _____ year graduated: _____

college / trade school: _____ year graduated: _____

degree: _____

minor: _____

other education: _____ year graduated: _____

Personal and Spiritual History

Write a brief testimony about how you became a Christian (include date).

Write briefly about significant events in your life that have impacted you spiritually.

Describe three major ways in which you have grown in your spiritual journey since you became a Christian.

How would you describe your spiritual journey now?

What accountability do you currently have in your spiritual journey?

What do you do when you have a conflict with someone? Would you consider yourself “good” at handling confrontation? How do you handle confrontation?

Are there any special issues or concerns happening in your life right now that would have an impact in your commitment and involvement in the youth ministry? (e.g. relationships, other commitments, etc.)

Legal and Lifestyle Concerns

In caring for students, we believe it is our responsibility to seek an adult staff that is able to provide healthy safe, and nurturing relationships. Please answer the following questions accordingly. Any special concerns can be discussed individual with the pastoral staff.

Are you using illegal drugs? yes no

Have you ever gone through treatment for alcohol or drug abuse? yes no
If yes, please describe.

What is your view on drinking alcohol?

Have you ever been arrested and / or convicted of a crime? yes no
If yes, please describe.

Have you ever had sexual relations with any minor after you became an adult? yes no

Have you ever been accused or convicted of any form of child abuse? yes no
If yes, please describe.

Have you ever been a victim of any form of child abuse? yes no
If yes, would you like to speak to a counselor or pastor? yes no

Ministry

How long have you attended Arrow Heights Baptist Church? _____

Are you a member? yes no

List the date and activities of other ministry experiences here at Arrow Heights Baptist Church, and the reasons for ending that ministry.

date stated	ministry / activity	date ended	reason

Describe any other ministry / church experience you have been involved with.

What spiritual gifts do you feel you have, and how would you like to use them in youth ministry?

Why do you want to do youth ministry?

What are some of your expectations of the youth ministry staff?

The information contained in this application is correct to the best of my knowledge. I, the undersigned, give my authorization to Arrow Heights Baptist Church or its representatives to release any and all records or information relating to working with minors. Arrow Heights Baptist Church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a youth worker. I understand that the personal information in this application will be held confidential by the professional Church staff.

signature: _____

today's date: _____