

MINISTRY INFORMATION

Please indicate the area in which you are interested in serving:

- | | |
|---|---|
| <input type="checkbox"/> Children's Ministry (infants through Elementary) | <input type="checkbox"/> Employers/Leaders |
| <input type="checkbox"/> Kendall Ministry | <input type="checkbox"/> Youth Ministry (6 th -12 th Grade) |
| <input type="checkbox"/> Am. Heritage Girls | <input type="checkbox"/> Paid childcare <input type="checkbox"/> CHEA |
| | <input type="checkbox"/> Other _____ |

Are you a MEMBER of a church? Yes No

If so, where? _____

And how long? _____

If you are currently a member of any church OTHER than Christ Covenant Church, please provide:

Leadership contact name (pastor/elder/deacon, etc.): _____

Phone: _____ Email: _____

Do you have a personal relationship with Jesus Christ? Yes No

How would you describe your relationship to Christ?

Are you willing to submit to accountability of the leadership of Christ Covenant Church with respect to your service among children and/or youth and/or vulnerable adults? Yes No

List any gifts, callings, training, education, or other factors that have prepared you for youth or children's work.

Please list all previous **church roles** (including here at Christ Covenant Church) working with children/youth, the church name and address, and associated supervisory reference name, phone, and email (for that particular ministry).

	#1	#2	#3
Church Role Serving Children/Youth			
Church Name			
Church Address			
Supervisor's Name			
Supervisor's Phone			
Supervisor's Email			

Please list any additional church work involving children/youth not listed above (including church name/address).

Please list other churches (not listed above) that you have attended regularly during the past five years (include city).

Please list all previous **non-church roles** working with children/youth, the organization's name and address, and associated supervisory reference name, phone, and email.

	#1	#2	#3
Non-Church Role Serving Children/Youth			
Organization Name			
Organization Address			
Supervisor's Name			
Supervisor's Phone			
Supervisor's Email			

Please list three **personal references** below that can speak to your character (See type of reference indicated for each column): Please print clearly. **DO NOT INCLUDE ANYONE ON CHRIST COVENANT STAFF.**

	Personal	Supervisor (Professional or Volunteer)	Family Member of the opposite sex of the applicant
Name			
Phone			
Email			

RECOMMENDATIONS REQUIRED FOR ALL VOLUNTEERS UNDER 18:

As An Elder/Deacon or member of ministry staff, Director level or above, I have met with or interviewed the above named Christ Covenant Member who is under 18 I and approve them for ministry.

**please note, the leader cannot be the Sr. Staff member who oversees the ministry in which the volunteer (under 18) seeks to serve.*

Signature of Christ Covenant leadership: _____

Date: _____

Christ Covenant leadership title: _____