



## VOLUNTEER APPLICATION

### *4 Step Process:*

- *Step 1: Fill out application*
- *Step 2: Talk with Allen*
- *Step 3: Pass background check*
- *Step 4: Get plugged in!*

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

What social media account do you have: \_\_\_\_\_

Employer: \_\_\_\_\_

WORK STATUS [ ] Part Time [ ] Full Time [ ] Student

MARITAL STATUS [ ] Single [ ] Married [ ] Divorce

EDUCATION:

High School: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

College/Trade School: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Degree: \_\_\_\_\_ Minor: \_\_\_\_\_

Other Education: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

## PERSONAL HISTORY

Write a brief testimony about how you became a Christian.

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 conflict with someone? 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.)

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

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

Are you willing to be fingerprinted for State Criminal Conviction Clearing?  Yes  No

How long have you attended FBCNV?

Are you a member of FBCNV?  Yes  No

Please list 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 FBCNV or its representatives to run a complete background check, releasing any and all records or information relating to working with minors. I understand that the personal information in this application will be held confidential by the professional church staff.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

