

Date _____

Grace Community Church Youth Volunteer Application

This is a confidential application to be completed by all YOUTH (Jr. High and High School) applicants for any volunteer position involving the supervision and or instruction of children at Grace Community Church.

1. PERSONAL INFORMATION

Name _____

Address (No P.O. Boxes) _____

City _____ Zip _____

Home Phone _____ Cell _____

E-mail _____ Age _____ Birth date _____

School Currently Attending _____ Grade _____

2. State briefly your personal testimony. Please include when and the circumstances surrounding your decision to commit your life to Jesus Christ.

3. How long have you attended Grace Community Church? _____

4. What ministries at Grace are you currently involved in? _____

5. What children's ministry/age group are you interested in serving in? _____

6. Have you worked with children other than a church setting? (Scouts, teaching, babysitting, coaching etc...) ___Yes ___No. If yes, please indicate the organization and the position you held or are currently holding. _____

7. List special gifts, training or interests you have that can be used with the children: (music, puppets, artistic, photography). _____

8. Do you know how to lead a person to Christ? ___Yes ___No

9. Would you like to have further instruction on how to lead a person to Christ? ___Yes ___No

10. Have you ever had any confrontations with law enforcement? ___Yes ___No

If yes, explain: _____

11. Is there any health reason that would keep you from effectively working with children or cause potential harm to our children? ___Yes ___No

If yes, please explain: _____

12. Church Background

Have you attended any other church before coming to Grace Community Church? ___Yes ___No

If yes, please give approximate dates you attended: _____

Church Name _____

City & State _____ Pastor's name _____

Were you involved in a ministry at this church? _____

13. List the names and addresses of two people who are not related to you and who are not church staff members, but who know you personally and have a definite knowledge of your character.

Name _____

Address _____ City/State _____

Zip _____ Phone _____

Name _____

Address _____ City/State _____

Zip _____ Phone _____

Applicant's Signature _____ Date _____

****Parent or guardian's signature is required if applicant is under 18 years of age.*

Parent or Guardian's Signature _____ Date _____