## Calvary Chapel Crystal River MINISTRY APPLICATION



Please attach a RECENT photograph and return completed form.

The following questions are designed to give us information which will assist us in available volunteer positions. We are not looking for professionals, but rather individuals who have a strong commitment to and faith in Jesus Christ our Lord. Becoming a volunteer is a commitment to God and the body, therefore, please pray and read the "Statement of Faith" page before filling out this application.

PERSONAL DATA Please Print:	Date:		
Name			
M/F Date of Birth			
Marital Status	StateZip Code		
Marital StatusSpouse's Name			
opouse's Name			
PHONE:			
Home	-		
May we call work? YES NO	kCell		
E-mail(s)			
Driver's License #	Social Security #		
	oodiai Security #		
Where are you employed?			
What type of work do you do there?			
Names and ages of children:			
Do you have any communicable diseaself so, what disease?	ses? YES NO		
Have you ever molested or physically a			
Have you ever been convicted of or ple If yes, please explain:	eaded guilty to a felony? YES NO		

## Section II

## SPIRITUAL DATA

A. Brief Christian testimony (Please indicate the year you received Christ).				
	4 Gardina di Aprila con il mini () de con il mini () de con il mini () que con que con de con esta del recon d Con il mini () de con il mini () de con il mini () que con il mini () de con il m			
B. Is Calvary Chapel Crysta				
C. Where did you attend be	fore?			
D. How long have you atter				
E. What Bible Studies are y River?	our presently and regular	ly attending at Cal		
F. What Adult Education cl			pel?	
G. Please give three referer application without address		ct. Please DO NOT	turn in your	
1. Name	Years known	Phone # ( )		
Address	City/State			
,				
2. Name	Years known	Phone # ( )		
Address	City/State		7in.	
	Only/Outo		4Ιμ.	
3. Name	Years known	Phone #/	-	
Addrage	Tours Kilowii	FIIONE#( )		
Address	City/State		Zip:	

H. In addition, if possible, list a pastor, elder or other minister at Calvary Chapel who could give you a reference.
<ol> <li>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. Feel free to use additional paper if necessary.</li> </ol>
Do you believe that the scriptures are infallible and verbally inspired by God?
2. What is your understanding of the Trinity? Is Jesus God?
3. How do you know that you are saved?
4. Why should a person be baptized?
5. Why is the resurrection of Christ important?
6. Do you believe that Jesus is coming again?
7. Do you disagree with any of the teachings of Calvary Chapel? If so, which ones, why?
3. Reasons for trials and sickness (are all healed?)

J. Describe your spiritual walk with God at t	the present time.
	truggling with that would prevent you from rightly nistry?
have regarding my character and fitness receipt and evaluation of this application individual, church, youth organization, corganization, including record custodian liability for damages of whatever kind orfamily, because of compliance or any attention,	ation is correct to the best of my knowledge. I oplication to give you any information that they may a for children or youth ministry. In consideration of the n by Calvary Chapel Crystal River, I hereby release any harity, employer, reference, or any other person or as, both collectively and individually, from any and all nature that may at any time result to me, my heirs, or tempts to comply, with this authorization. I waive any on or organization identified by me in this application.
Print Name	Signature
Date	•

IF YOU DO NOT HEAR FROM US WITHIN TWO (2) WEEKS AFTER TURNING IN THIS APPLICATION: Please call the Church Office.