



Ministry Partner Application

--- Confidential ---

PERSONAL (Full name as it appears on your Birth Certificate or Passport)

Last Name: _____ First Name: _____ M.I. _____

Nickname: _____

Address: _____ City/State: _____ Zip: _____

E-Mail Address: _____ Social Security: # _____

Phone: Home (____) _____ Necessary if working with Children & Youth

Cell (____) _____ Work (____) _____

Date of Birth: _____ Age: _____ Male Female

Single Engaged Married Separated Divorced Widowed

CHURCH INFORMATION

Do you attend Sunday Services at Pine Hills Church? Yes No

When did you start attending? Month/Year _____/_____

Have you completed the following at Pine Hills Church?

Connect 101 Yes No

Membership Yes No

Believers Baptism Yes No

Connections 201 Yes No

Connections 301 Yes No

Connections 401 Yes No

Are you part of a Group or Team? Yes No

If yes, which best describes your Group / Team?

Affinity Bible Study Serve Other

Who is the leader of the Group / Team? _____

What churches did you attend in the past five years prior to Pine Hills Church?

Church Name	Pastor's Name	Years
Attended		
_____	_____	_____
_____	_____	_____

In which Pine Hills Church ministries are you seeking to become involved? And why? _____



What skills would you bring to this ministry? _____

Please list your spiritual gifts, talents, skills: _____

Briefly list any previous experience in ministry: (i.e., children, students, adult, first impressions, creative arts, administrative, grounds, trades, etc.): _____

SELF - DESCRIPTION

Please **circle** the words that BEST describe you and **cross out** the words that LEAST describe you.

Trust-worthy	Dependable	Active	Compassionate	Reliable
Punctual	Flexible	Laid-back	Quick Thinker	Spontaneous
Self-Starter	Decisive	Teachable	Team Player	Humorous
Thoughtful	Leader	Risk Taker	Patient	Reflective
Honest	Organized	Creative	Disciple	Faithful
Teachable	Available	Innovative	Designer	Administrative

EMPLOYMENT / EDUCATION – Current and Past

Employed Self-Employed Retired Unemployed Student Other

Employer: _____ Position: _____

Employer: _____ Position: _____

Employment and/or Educational experience(s) that would assist you in this volunteer role: _____

SPIRITUAL LIFE

Please indicate the nature of your present relationship with Jesus Christ.

Right now in my spiritual journey, I ...

- ...am not yet a believer
- ...have recently trusted Christ
- ...have trusted Christ and developing as a follower of Christ
- ...have trusted Christ, am a self-feed believer, am involved in mentoring and discipling others

Please briefly describe your spiritual journey:

List some ways that you maintain and grow your relationship with Jesus Christ? _____

CHARACTER REFERENCES – *Character Reference Form may be sent to each person listed below*

1. Pine Hills Church Staff: _____ Length of Time Known: _____

2. Group or Team Leader: _____ Length of Time Known: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

3. Other Reference: _____ Length of Time Known: _____

Address: _____ City: _____ Zip: _____

Nature of the relationship: _____

Home Phone: _____ Work Phone: _____

4. Other Reference: _____ Length of Time Known: _____

Address: _____ City: _____ Zip: _____

Nature of the relationship: _____

Home Phone: _____ Work Phone: _____

DISCLOSURE OF RISK: AGREEMENT OF AUTHORIZATION, WAIVER, AND RELEASE

1. I recognize that Pine Hills Church (PHC) is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.
2. I authorize PHC to contact any person or entity listed in this application, and I further authorize any such person or entity to provide PHC with information, opinions and impressions relating to my background or qualifications.
3. I voluntarily release PHC and any such person or entity listed herein from liability involving the communication of information relating to my background or qualification. I further authorize PHC to conduct a comprehensive background investigation (including criminal).
4. I have carefully read the policy and procedures and I agree to abide by them and to protect the health and safety of those I minister to at all times. I agree to be subject to the authority of the Word of God and PHC and its policies in living out a Biblical lifestyle.
5. By signing below, I am acknowledging that I understand and will abide by the guidelines set by PHC. I understand that my status may be terminated if I do not abide with actions that are not compliant with this agreement. I understand this is a legally binding agreement and I am freely signing it.

I certify that the information provided in this application is true and correct to the best of my knowledge. I HAVE READ AND UNDERSTAND THE DISCLOSURE OF RISK: AGREEMENT OF AUTHORIZATION, WAIVER, AND RELEASE. I am giving my authorization to Pine Hills Church to verify the information and to contact my references and appropriate governmental agencies.

Signature

Date

Parent / Guardian Signature

Date