

**Christian Support Ministry
Volunteer Application**

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL: _____

PHONE: (H) _____ (C) _____

NAME OF SPOUSE (if married) _____

CHURCH AFFILIATION _____

EDUCATION: HIGH SCHOOL ____ COLLEGE ____ GRADUATE ____

SCHOOL/UNIVERSITY _____

CURRENT EMPLOYMENT: _____

POSITION: _____ HRS/WEEK: _____

PREVIOUS VOLUNTEER EXPERIENCE: YES ____ NO ____

WITH WHAT ORGANIZATION (S)? _____

HRS/WEEK YOU COULD VOLUNTEER: _____

Do you have any past or pending criminal convictions? If yes, please provide date and explanation. ____ Yes ____ No

(MORE QUESTIONS ON BACK)

FOR OFFICE USE ONLY

Date Received: ____/____/____

COC Approval: _____ ____/____/____

COO/CEO Approval: _____ ____/____/____

The Christian Support Ministry training requirement is a minimum of 24 hours. On-going in-service training may take place after the initial training period. A commitment of one day or one half-day per week will begin after the initial training period. Are you able to give this time? _____

Personal experience

What are your current church activities?

Why do you feel called to this ministry of helping hurting people?

Please describe your personal relationship with Jesus Christ: salvation, personal growth in relationship with God, Jesus and the Holy Spirit.

Have you had experience in sharing your faith with other people? If so, describe.