

CLIFFWOOD PCA YOUTH MINISTRY ADULT LEADERSHIP TEAM APPLICATION

Thanks for your interest in our youth ministry, and (in advance) for taking the time to fill out this application. While it's a bit cumbersome, these are important questions that help us know both how to plug you into our ministry and how to provide training to make you the most effective youth worker you can be. If there's anything we ask here that you don't feel comfortable responding to on paper, we can arrange a personal discussion instead. But please be assured that these applications will be kept strictly confidential.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

E-mail (if you have one): _____

Vocation: _____ How long? _____

A) TESTIMONY

Please give a brief account of how you became a Christian: _____

Briefly summarize God's plan of salvation: _____

Why do you want to work with our youth? _____

B) CHURCH BACKGROUND

How long have you attended Cliffwood? _____

Are you a member of Cliffwood? _____ If so, how long? _____

If not, what are your plans regarding membership? _____

If you have been a member at Cliffwood for less than 3 years (or if you are not currently a member), please provide the following information:

Name of last church attended: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Were you a member? _____

Name of church leader contact: _____ (title) _____

C) YOUTH MINISTRY BACKGROUND

Have you ever participated as a youth leader in the past? _____

If yes, please provide the following information:

Name of church: _____ Phone: _____

Name of youth pastor/youth leader: _____

Briefly describe how you were involved: _____

What did you most enjoy about this ministry? _____

What did you least enjoy? _____

What ministry are you most interested in working with at Cliffwood?

- Middle school group
- High school group
- Leading a weekly small group
- Sunday School
- Other: _____

2) Dating standards: _____

3) Handling conflict between you and another person: _____

4) Personal entertainment (movies, TV, social activity): _____

5) Smoking/Tobacco Use: _____

CHARACTER REFERENCES

Please provide the following references:

A Friend:

Name: _____

Address _____ Phone (day): _____

City: _____ State _____ Zip _____ Phone (night): _____

How long has this person known you? _____

A Church Leader:

Name: _____ Title: _____

Address _____ Phone (day): _____

City: _____ State _____ Zip _____ Phone (night): _____

How long has this person known you? _____

General Reference:

Name: _____ Relationship: _____

Address _____ Phone (day): _____

City: _____ State _____ Zip _____ Phone (night): _____

How long has this person known you? _____

APPLICANT'S STATEMENT AND PERMISSION RELEASE

The information contained in this application is correct to the best of my knowledge. I am giving my authorization to Cliffwood Presbyterian Church or its representative to verify the information on this application and to contact my references or the appropriate governmental agencies. Should my application for leadership be accepted, I agree to be bound by the policies of both Cliffwood Presbyterian Church and its youth ministry.

Signature: _____ Date: ____/____/____