



SERVE TEAM APPLICATION

APPLICANT NAME: _____

LIST ANY RELEVANT TRAININGS, EDUCATION OR EXPERIENCE THAT HAVE PREPARED YOU TO SERVE IN THIS
MINISTRY: _____

DO YOU HAVE ANY LAW ENFORCEMENT OR MEDICAL TRAINING, OR ARE YOU CPR CERTIFIED? YES NO EXPLAIN:

SPIRITUAL GROWTH INFORMATION

HAVE YOU PERSONALLY ACCEPTED JESUS CHRIST AS YOUR LORD AND SAVIOR AND ARE YOU COMMITTED TO HAVING THE
CHARACTER OF JESUS LIVE THROUGH YOU?

YES NO IF YES, WHEN DID YOU MAKE YOUR PROFESSION OF FAITH IN CHRIST? DATE/AGE:

WERE YOU BAPTIZED BY IMMERSION? YES NO DATE/AGE: _____

ARE YOU A MEMBER OF THIS CHURCH? YES NO IF YES, HOW LONG HAVE YOU BEEN A MEMBER?

WHAT WORSHIP SERVICE DO YOU ATTEND: _____

WHAT COMMUNITY GROUP ARE YOU A PART OF? _____

WHAT MINISTRY TEAM ARE YOU INTERESTED IN SERVING WITH? _____

