



FBC MINISTRY APPLICATION FORM

For YOUTH working with CHILDREN or YOUTH

Thank you for your interest in serving in Children's or Youth ministry here at First Baptist Church. Due to our responsibility to reduce the risk of abuse within our church ministries, we believe the information requested below is necessary to protect our children and our volunteers and to effectively place our volunteers in ministry positions. Thank you in advance for your partnership.

GENERAL INFORMATION (Please print)

Full Name: _____ Date: _____

Street Address: _____ City: _____

Province: _____ Postal Code: _____ Birthdate: _____/_____/_____
day month year

Email: _____

Phone Number: (H) _____ (C) _____

How long have you attended FBC? _____

Are you a regular attender of FBC? ☐ Yes ☐ No
(Average of 2 Sundays per month or more)

Are you a member of FBC? ☐ Yes ☐ No

SPIRITUAL HISTORY

Have you accepted Jesus Christ as your Saviour? ☐ Yes ☐ No How long ago? _____

Have you been baptized? ☐ Yes ☐ No

Please share how you came to know Jesus and where you are now in your faith (use the back of page if needed):

MINISTRY QUESTIONNAIRE

What grade are you currently in? _____

Please list some of your hobbies, interests or skills:

Volunteer Experience and Part-time Jobs (including date completed Babysitter's Course):

Are your parents supportive of your ministry involvement? ☐ Yes ☐ No

If no, please explain: _____

Describe why you would like to be part of our Children's or Youth Ministry Team.

What strengths or assets would you bring to our Children's or Youth Ministry Program?

What areas of concern do you have in working with children or youth?

Do you see yourself as a team player? Please explain.

☐ Yes ☐ No

Please note the commitment level you would be able to agree to (ie. weekly, bi-weekly, monthly):

Please list the area of ministry in which you would like to serve.

REFERENCES

Please list two adult references below. One reference should be from a parent or guardian, and the other should be from your youth pastor, small group leader, employer or teacher (or another adult that you've known for at least one year and who have a definite knowledge of your character and ability to work with children). Please detach the following two reference forms and hand them to the adults you have listed as references and ask them to return the forms to the Pleasantview Bible Camp office in one of the ways indicated on the form.

1. Name of Parent or Guardian Reference: _____ Phone: _____

Email Address: _____ **PLEASE include email if at all possible!**

Relation to Applicant: _____

2. Name of 2nd Reference: _____ Phone: _____

Email Address: _____ **PLEASE include email if at all possible!**

How long have you known this person? _____

Nature of Relationship: _____

RELEASE OF INFORMATION

***NOTE:** Submitting this form gives consent to FBC to utilize the information provided above in ways relevant to the purpose of your submission, enter you in the FBC electronic database and add you to an applicable FBC email list(s). Should you desire to be removed from the list(s) in the future just click on the 'Unsubscribe' link provided at the end of FBC emails.*

Signature of Applicant: _____

Printed Name: _____ Date: _____

Signature of Parent/Guardian: _____

Printed Name: _____ Date: _____