

Please provide two non-related personal references:

1.) Name: _____ Phone #: _____

2.) Name: _____ Phone #: _____

Do any of the references listed above know you by a different name? _____

If yes, what name: _____

Place of Employment/School: _____ Type of Work: _____

How long have you attended ACCF? _____

Please describe your relationship with Jesus Christ: _____

What kind of ministry have you been involved with in the past? : _____

Last three churches attended:

1.) _____ How long: _____ Reason for leaving: _____

2.) _____ How long: _____ Reason for leaving: _____

3.) _____ How long: _____ Reason for leaving: _____

CONTACT INFORMATION: The following information will help us keep you updated on what is going with the ACCF children's ministry.

Mailing Address: _____

(If different from _____
Physical address) Street Address/PO Box

City

State

Zip Code

Home Phone #: _____ Other Phone: _____

Emergency Contact: _____ Phone #: _____

I agree that:

-The information provided in this questionnaire is correct to the best of my knowledge.

-The information provided in this questionnaire may be used to obtain social security number verification and criminal history reports from a third-party provider.

- Athey Creek Christian Fellowship is authorized to contact the references supplied on this questionnaire to obtain any necessary information regarding my assistance with the children's ministry.

Applicant Signature

Date