Shoreline Calvary Chapel's

Ministry Application

The following application is designed to help us know you better. We are not looking for professionals. We are looking for faithful, available, and committed Christians who love the Lord and love serving His Body. The mission of Shoreline Calvary Chapel is to preach the gospel, teach the Word of God, and reach out to unbelievers and the Body of Christ. May the Lord bless you as you seek to serve the Body of Christ!

Shoreline Calvary Chapel values and respects the confidentiality of any and all information provided by the applicant and is committed to protecting his or her privacy.

PERSONAL INFORMATION

Date _____

Full Name _____ Gender: Male Female

Address _____ Home Phone_____

City _____ Zip _____ Cell Phone _____

Email Address _____ Date of Birth _____

Social Security No. _____ Driver's License No. _____

Marital Status: Single Married _____ Anniversary_____ Divorced Separated
Spouse's Name

Names and Ages of Children _____

_____

Place of Employment _____ Work Phone_____

What type of work do you do? _____

Are you willing to commit to serve at least six months? _____

Please feel free to use a separate sheet of paper if you need more space to answer the following questions.

BACKGROUND

How long have you been a full-on Christian?

_____

_____

How did you come to know Jesus as Lord and Savior?

_____

_____

_____

_____

_____

_____

_____

*Applicant Last Name:*_____

What has the Lord been doing in your life recently? How is your walk with Him right now?

_____

_____

_____

_____

_____

_____

_____

How long have you been attending Shoreline Calvary Chapel? _____

Would you consider Shoreline your home church? _____

Do you attend a mid-week Bible study? **Yes** **No** Where and when? _____

_____

Where did you attend church before attending Shoreline? _____

_____

What were your reasons for leaving your former church? _____

_____

Previous church involvement experience

_____

_____

_____

Have you ever been discipled or had an accountability partner? If so by whom and is this current?

_____

_____

In what way, if any are you currently serving in the body of Christ?

_____

_____

Do you have any training in CPR and/or First Aid?

_____

Do you have any specific experience or gifts that would be useful in this ministry?

_____

_____

_____

*Applicant Last Name:*_____

Have you ever been removed from a ministry? If so, why?

_____

_____

What are your past-times and/or hobbies?

_____

_____

BELIEFS

Please briefly state your beliefs regarding the following questions. This is not a test of your Bible knowledge, but we want to know what you believe regarding these key doctrines.

Who can be saved and what must a person do to be saved?

_____

_____

What is your understanding of the Trinity? Is Jesus God?

_____

_____

Are the gifts of the Spirit (i.e. prophecy, teaching, healing, tongues, etc.) active in the present day? **Yes** **No**
Who is the Holy Spirit and what role does the Holy Spirit play in your life as a believer?

_____

_____

_____

Do you believe that Jesus is coming again? If so, when?

_____

_____

_____

What is your view of the Bible (do you consider it without error, etc)?

_____

_____

Is there a literal Heaven? _____ Is there a literal Hell? _____

*Applicant Last Name:*_____

Do you disagree with any of the teachings of Calvary Chapel Shoreline?

_____

If so, which ones and why?

_____

_____

_____

(Optional) Do you see any needs in which Shoreline could better minister or have any ideas of new ministries to start?_____

_____

_____

ADDITIONAL INFORMATION

Please list a servant here at Shoreline who could give you a reference.

Name _____ Years known _____

BACKGROUND SECURITY QUESTIONS

Do you have any communicable diseases?	Yes	No
Have you ever been accused of molesting or physically abusing a minor?	Yes	No
Have you ever been convicted of or plead guilty to a crime?	Yes	No

If yes to any of the above, please explain:

_____

_____

Would you mind being background checked?	Yes	No
Would you mind being photographed? (Facebook / Website)	Yes	No

SIGNATURE

By signing below I affirm that the above information is true and correct to the best of my knowledge. I authorize the disclosure of this information to ministry personnel deemed appropriate by Shoreline Calvary Chapel for approval for or placement within this ministry.

I authorize Shoreline Calvary Chapel to contact all sources of reference and conduct any necessary background checks such as a: National Criminal Background Search, State Criminal Background Search, and an Individual State Sexual Offender Search at its discretion.

_____

Signature *Date*

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Revised 2014-10-08

*Applicant Last Name:*_____