

# Student Ministry

## Community Christian Church

Date: \_\_\_\_\_

Thank you for taking time to share with us about yourself. Please note that the following information will be confidential and only shared with appropriate pastoral staff.

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Birthday (Month/Day/Year) \_\_\_\_\_  
Year will be confidential

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Employment Status: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Student \_\_\_\_\_

How long have you attended CCC? \_\_\_\_\_

How long did you attend church before CCC? \_\_\_\_\_

Check service you regularly attend:  Sunday 8:30 AM  Sunday 10:00 AM  Sunday 11:30 AM

Are you in a small group? Yes No Whose Group? \_\_\_\_\_ When does your group meet? \_\_\_\_\_

Are you presently involved in a CCC ministry? Yes No Which Ministry? \_\_\_\_\_

Have you attended Starting Point at CCC? Yes No If no, why not? \_\_\_\_\_

How did you hear about CCC? \_\_\_\_\_ Are you a member of CCC? Yes No

Have you been baptized? Yes No If yes, where and how old? \_\_\_\_\_

Do you use the daily readings provided by CCC? Yes No

What is your favorite thing about CCC? \_\_\_\_\_

If you could change one thing about CCC what would it be? \_\_\_\_\_

### EDUCATION

High School \_\_\_\_\_ Year Graduated \_\_\_\_\_

College \_\_\_\_\_ Year Graduated \_\_\_\_\_

Degree \_\_\_\_\_ Major \_\_\_\_\_

Other Schooling \_\_\_\_\_

Student Ministry Application – Page 2  
**Your Journey**

Please take some time and think through your journey of faith up to this point and then share your story below:

---

---

---

---

---

---

---

---

---

---

Briefly write about significant events in your life that have impacted you spiritually: \_\_\_\_\_

---

---

---

---

---

Describe three major ways in which you have grown in your spiritual walk since you became a Christian:

---

---

---

---

---

Who has influenced you most in your walk, why, how? \_\_\_\_\_

---

---

---

---

How would you describe your spiritual walk now? \_\_\_\_\_

---

---

---

---

What accountability to your spiritual walk do you have? \_\_\_\_\_

---

---

---

Are there any special issues or concerns happening in your life right now that would have an impact in your commitment and involvement in The Student Ministries? (i.e. relationships, other commitments, etc.)

---

---

---

---

What are some strengths in your life? \_\_\_\_\_

---

What are some of your areas of weakness? \_\_\_\_\_

---

What abilities, skills, or talents do you think you possess that will help you in your ministry to students?

---

---

**LEGAL**

In caring for students, we believe it is our responsibility to seek an adult staff that is able to provide healthy, safe and nurturing relationships. Please answer the following questions accordingly.

Are you using illegal drugs? Yes    No

Have you ever gone through treatment for alcohol or drug use? Yes    No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been arrested and/or convicted of a crime? Yes    No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Have you had any sexual relations with any minor after you became an adult? Yes    No

Have you ever suffered through any sort of mental, physical, or sexual abuse? Yes    No

Are you willing to have CCC run a background check for Criminal Conviction Clearing? Yes    No

**MINISTRY**

How long have you been attending Community Christian Church? \_\_\_\_\_

List previous ministry experience (churches attended, nature of involvement, etc): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want to work with students? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What spiritual gifts do you believe yourself to have and how would you like to use them in this student ministry? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are some expectations you would have of the volunteer youth leaders? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are some expectations you would have of the Student Minister? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Name \_\_\_\_\_ Yrs. Known \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Yrs. Known \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Yrs. Known \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

---

The information contained in this application is correct to the best of my knowledge. I, the undersigned, give my authorization to Community Christian Church or its representatives to release any and all records and information relating to working with minors. The Church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a youth worker.

I understand that the personal information will be held in confidence by the church staff.

Signature \_\_\_\_\_ Date \_\_\_\_\_