

# MINISTRY SURVEY FOR CHILDREN'S/YOUTH DEPARTMENT

*This survey is to be completed by all those desiring any ministry position (volunteer or compensated) involving the supervision or custody of minors. It is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.*

## GENERAL

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
Number Street City Zip

Number of years at this address \_\_\_\_\_ If less than five, give previous address and number of years  
at that address: Years \_\_\_\_\_ Address \_\_\_\_\_

Occupation \_\_\_\_\_

Social Security No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_ ' Verified

Marital status: ' Married ' Single ' Separated ' Divorced ' Widowed

Home phone \_\_\_\_\_ Phone during day \_\_\_\_\_

Are you a Christian? \_\_\_\_\_

How long have you had a personal relationship with Jesus Christ? \_\_\_\_\_

Have you been baptized in the Holy Spirit? \_\_\_\_\_

Have you been baptized by water immersion? \_\_\_\_\_ If so, where? \_\_\_\_\_

How long have you attended First Assembly? \_\_\_\_\_

Are you a member? \_\_\_\_\_ If so, how long? \_\_\_\_\_

Please check those services that you regularly attend at First Assembly:

Sunday ' 9:00 A.M. Wednesday ' 7:00 P.M.  
' 10:45 A.M.  
' 6:00 P.M.

What area of Christian service do you desire to be involved in? \_\_\_\_\_

Please explain why you feel God's call on your life for this area of service.

(continued)

# MINISTRY SURVEY, continued

## CHURCH ACTIVITY

What leadership experience have you had?

List all previous church work or other work involving children and youth (identify place and type of work). List supervisors.

What other churches have you attended regularly during the past five years?

List any gifts, training, education, or other factors that have prepared you for children's/youth work.

## PERSONAL REFERENCES

Name	_____	Name	_____
Address	_____	Address	_____
	_____		_____
Phone	_____	Phone	_____

## PERSONAL HISTORY

Have you ever been convicted for the use or sale of drugs? \_\_\_\_\_ If yes, please explain:

Have you ever been hospitalized or treated for alcohol or substance abuse? \_\_\_\_\_ If yes, please explain:

*(continued)*

## MINISTRY SURVEY, continued

Have you ever been arrested for a criminal offense excluding minor traffic violations? \_\_\_\_\_ If yes, please explain:

Have you ever been accused, arrested, or convicted of any sexually related crimes? \_\_\_\_\_ If yes, please explain:

Have you ever been accused, arrested, or convicted of any abuse-related crimes? \_\_\_\_\_ If yes, please explain:

Are there any circumstances involving your lifestyle or your background that would call into question your being entrusted with the care of young people?

### APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any references, churches, or other organizations listed in this application to give you any information they may have regarding my character and fitness for children's/youth work, and I release all such references from liability for any damage that may result from furnishing such evaluations to you.

Should my application be accepted, I agree to be bound by the Articles and Bylaws and Policies of First Assembly of God, San Diego, California, and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I understand that the personal information will be held confidential by the professional church staff.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Received by department head \_\_\_\_\_ Date \_\_\_\_\_

Applicant interviewed by \_\_\_\_\_ Date \_\_\_\_\_