

Applicant's Statement & Waiver

CALVARY CHAPEL SOUTH BAY

19300 South Vermont Avenue • Gardena, CA 90248

Please read carefully, **initial** each paragraph & **sign** below.
This information is required by State and Insurance purposes.

GENERAL MINISTRY APPLICATION

Greetings,

It is a joy to serve the Lord and others. Paul served God because of who God is. Because of who God is, he was able to say, "the love of Christ compels me".

We invite you to serve the Lord here at Calvary Chapel South Bay. There are a multitude of ministries and needs. Take time to prayerfully consider how you will allow God to use you.

The following questions in this application are designed to help us know you better. All who serve regularly in ministry are required to submit this information to Calvary Chapel South Bay (CCSB) prior to serving in a ministry of CCSB. Please do not allow this application to intimidate you from service. We are simply looking for faithful, committed Christians who love the Lord, and desire to be used of the Lord, to do the work of ministry.

In His Service

Initial

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for service in Ministry and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure a position in ministry shall be grounds for rejection of this application or for immediate discharge if I am accepted regardless of the time elapsed before discovery.

Initial

I hereby authorize the church to thoroughly investigate my references, and other matters related to my suitability for ministry and, further, authorize the references I have listed to disclose to the church any and all letters, reports and other information related to me, without giving me prior notice of such disclosure. In addition, I hereby release the church and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initial

I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my service, if accepted, is intended to create a contract between the church and me. In addition, I understand and agree that if I am accepted, my service is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the church, and that no promises or representations contrary to the foregoing are binding on the church unless made in writing and signed by me and the church's designated representative.

SIGN & DATE

OFFICE ONLY

Reviewed by
Pastor/Leader: _____ Date: _____
Ministry Name: _____
SIGN

Name: _____

Address: _____

City/Zip: _____

Home or Cell Phone: _____

Work Phone: _____

E-Mail Address: _____

CCSB will take your picture for our files upon completion of application.

Date

Applicant's Name

Applicant's Signature

What is your occupation? _____

Marital Status: _____ Spouse's Name: _____

If you are married, does your spouse agree with your involvement in this ministry? _____

Names of your children: _____

Why do you want to serve in ministry? _____

What ministry do you want to serve in, or are currently serving in?

Is Jesus God? _____

Do you believe the Bible is infallible and verbally inspired by God? _____

What is your understanding of the Trinity? _____

Are you born again? _____

For reference purposes, please list two people who are not related to you and who have known you for at least one year.

Name: _____ Years known: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ Relationship: _____

Name: _____ Years known: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ Relationship: _____

Have you had any mental illness or psychological problems? _____

If so, explain: _____

Are you presently taking medication or are under a doctor's treatment? _____

If so, explain: _____

Would you object to being fingerprinted? _____ Photographed? _____

Have you ever molested a child? _____

Have you ever been accused of molesting or been arrested for, or convicted of either child abuse or molestation?

Do you consent to the church conducting a criminal background check, including willfully providing the the church (or its agent) your fingerprints as well as related personal data I order for the church to obtain information from LiveScan or other criminal background check provider?

_____ Yes _____ No