



SERVE APPLICATION
Please Print

YOUR INFORMATION

Name:		Phone:	
Sunday serving notifications can be sent via text. If you would like to receive reminders by text, please list your Cell Phone Provider:			
Address:		Apt:	Best time to call:
City:		State:	Zip Code:
Email Address:			
Marital Status:		DOB (mm/dd/yyyy):	<input type="checkbox"/> Male <input type="checkbox"/> Female
Spouse Name:		How long have you attended New Life Church?	
Children and DOB:			
High School (Name, City, State)		College / University (Name & Degree)	
Occupation:			
Employer:			

WHERE ARE YOU INTERESTED IN SERVING? [Please rank in order of your interest level.]

<input type="checkbox"/> Welcome Team/Greeting/Hospitality	<input type="checkbox"/> Worship
<input type="checkbox"/> Ushers	<input type="checkbox"/> Administrative/Office Help
<input type="checkbox"/> Parking Lot	<input type="checkbox"/> Media/Graphics/Video/Photography
<input type="checkbox"/> Nursery/Preschool	<input type="checkbox"/> Production Team/Audio/Camera/Lighting
<input type="checkbox"/> Elementary Kids	<input type="checkbox"/> Homeless/Community Outreach
<input type="checkbox"/> Special Needs	<input type="checkbox"/> Life Group Leader
<input type="checkbox"/> Students (6 th -12 th Grade)	<input type="checkbox"/> Other: _____
I would like to serve on: <input type="checkbox"/> Sunday Morning <input type="checkbox"/> Other _____	

TELL US A LITTLE BIT ABOUT YOU

Tell us about some of your gifts, experiences, training, and interests:
(For example: organization, music, art, drama, writing, carpentry, leadership, previous involvement in church, community or school organizations.)

MORE ABOUT YOU

Have you given your life to Christ? Yes No *If yes, when?*

Have you been water baptized? Yes No *If yes, when?*

Please briefly share with us how you came to know Christ:

Have you attended Starting Point? Yes No *If yes, when?*

Do you tithe regularly to New Life Church? Yes No

Are there any limitations, physical or otherwise, that should be taken into account when considering your placement in ministry?

Yes No *If yes, please explain:*

YOUR SERVING STORY

I am new to serving. Yes No

Have you worked or volunteered at New Life Church before? Yes No

If yes, please describe: _____

Have you ever worked or volunteered at another church? Yes No

If yes, please provide the following for each church where you have served in the past. (Use additional paper if necessary.)

Church Name:	Dates:	
Address:		
City:	State:	Phone:
How did you serve?	Supervisor:	
Church Name:	Dates:	
Address:		
City:	State:	Phone:
How did you serve?	Supervisor:	

Please Give us Two Adult Personal References (Other Than Relatives or Employers)

Name:	Name:
Address:	Address:
State: Zip:	State: Zip:
Phone:	Phone:
E-mail Address:	E-mail Address:
Relationship to you:	Relationship to you:

WHAT DO YOU BELIEVE?

Indicate all statements that apply to you. ***I Believe:***

- | | |
|--|--|
| <input type="checkbox"/> That Jesus Christ was conceived by the Holy Spirit and born to a virgin. (Matt 1:23). | <input type="checkbox"/> That the Holy Bible is the inspired written Word of God (2 Timothy 3:16). |
| <input type="checkbox"/> That Jesus is God's Son (John 3:16) and the only sacrifice for sin (Romans 3:23-25). | <input type="checkbox"/> That a person must be born again to receive eternal life (John 3:3-8). |
| <input type="checkbox"/> That Jesus was raised from the dead (Romans 10:9) and now sits at the right hand of the Father in Heaven (Mark 16:19) | |

YOUR BACKGROUND

A "yes" answer does not necessarily disqualify you.

Have you been diagnosed with any communicable or contagious disease that has any chance of being passed on to other adults or children? (*HIV, AIDS, Hepatitis, Tuberculosis, etc.*)

Yes No *If yes, please explain:*

Have you ever been charged, arrested, or convicted of a felony or misdemeanor?

Yes No *If yes, please explain:*

Have you ever terminated your employment or had your employment terminated or has your employer ever reprimanded you for reasons relating to allegations of:

1. Theft or mishandling of monies or company property? Yes No

If yes, please explain:

2. Physical or sexual abuse or sexual harassment by you? Yes No

If yes, please explain:

Have you ever been *accused* of anything involving physical or sexual abuse, neglect, child pornography, or sexual harassment? Yes No

If yes, please explain:

Has your driver's license ever been suspended or revoked? Yes No

If yes, please explain:

Other than above, is there any fact or circumstance involving you or your background that would call into question you being entrusted with the supervision, guidance, and care of children or young people?

Yes No

If yes, please explain:

PLEASE READ AND SIGN

My answers on this application are complete and true to the best of my knowledge. I authorize New Life Church and its agents to verify any information related to my application. I also authorize individuals, schools, employers, and law enforcement or government officials to freely release any information concerning my background and character. In consideration of the receipt and evaluation of this application by New Life Church, I hereby release any individual church, or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs or family on a account of compliance, or any attempt to comply, with this authorization, excepting only the communication of knowingly false information.

I understand that I have the right to inspect any information provided about me by any person or organization identified by me in this application, upon my request.

Should my application be accepted, I agree to submit to the policies and procedures of New Life Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church. I agree to live my life in a manner that honors the Lord and reflects the values of New Life Church.

I further state that I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

APPLICANT SIGNATURE:

DATE:

NEED MORE SPACE FOR SOMETHING? WRITE IT HERE:

