



Ministry Questionnaire

Please prayerfully fill out the following information and return the completed Ministry Questionnaire to Calvary Chapel Dayton Valley, 28 Enterprise Way, Dayton, NV 89403, as soon as possible. This application does not guarantee an opening in any of these areas, but will give us an idea of the talents and gifts that you bring to our body. We will keep this application on file for future reference should certain areas become available. Please note that certain areas may require further application procedures. May the Lord bless you in this endeavor.

General Information:

Full Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____

E-mail Address _____ Date of Birth _____

Male Female Marital Status Married Single Divorced Widowed

Have you ever been convicted of a felony? Yes No
If yes, please explain. (Use additional paper if necessary) _____

Are there any issues in your personal background that might disqualify you from Ministry? Please explain the details of any issue that might be viewed as disqualifying you or might be viewed as causing others to stumble in relation to the qualifications for Ministry given in Timothy and Titus. (Use additional paper if necessary) _____

Personal References:

Name _____ Years Known _____ Phone _____

Address _____ City _____ State/Zip _____

May we contact this person? Yes No

Name _____ Years Known _____ Phone _____

Address _____ City _____ State/Zip _____

May we contact this person? ___ Yes ___ No

Please Check the Ministries You May Be Interested In:

Children's Ministry

Service: _____ Time: _____

___ Sunday ___ 9:00AM ___ 11:00 AM

___ Thursday ___ 7:00PM

Class:

___ Nursery ___ Children's Church

Role:

___ Teacher ___ Helper ___ Substitute

Worship Ministry* (Add'l. Application Required)

Service: _____ Time: _____

___ Sunday ___ 9:00AM ___ 11:00 AM

___ Thursday ___ 7:00PM

Do you play an instrument? ___ Yes ___ No

If yes, what instrument? _____

Formal Musical Training? ___ Yes ___ No

If yes, where? _____

Helps Ministry

___ Encouragement

___ Hospitality (home cooked meals for the ill)

___ Hospital/Retirement Visits

___ Other _____

___ Motorcycle Ministry (Riding) ___ Motorcycle Ministry (NON-Riding)

Youth (Teen) Ministry

Service: _____ Time: _____

___ Sunday ___ 9:00AM ___ 11:00 AM

___ Thursday ___ 7:00PM

Role:

___ Teacher ___ Helper ___ Substitute

Sound Ministry

Service: _____ Time: _____

___ Sunday ___ 9:00AM ___ 11:00 AM

___ Thursday ___ 7:00PM

Ushering Ministry

Service: _____ Time: _____

___ Sunday ___ 9:00AM ___ 11:00 AM

___ Thursday ___ 7:00PM

Special Events Set-Up/Tear Down

Prayer Chain:

We send out prayer requests via e-mail. If you would like to receive prayer chain updates, please provide your email address below:

Spiritual Profile:

Is Calvary Chapel Dayton Valley your home church? ____ Yes ____ No

If yes, how long have you been attending? _____

Which service(s) are you presently and regularly attending? _____

What is your current church involvement? _____

Previous church: _____ How long did you attend that church? _____

Name of Pastor: _____ Church Phone #: (____) _____

May we contact this Pastor? ___Yes ___No

What ministries were you involved in? _____

Share a little about how the Lord used you: _____

Describe your:

Personality: _____

Relationship with others: _____

Personal strengths: _____

Personal weaknesses: _____

Spiritual Gifts: _____

Talents: _____

Salvation Experience (Please include an approx. date): _____

Current relationship with the Lord in terms of your devotional and prayer life: _____

Please write a brief, but concise, statement of your belief regarding the following:

God: _____

Jesus Christ: _____

Holy Spirit: _____

Sin: _____

The Bible: _____

Salvation: _____

Baptism: _____

The Rapture: _____

The information contained in this application is correct, to the best of my knowledge. I authorize any references listed in this application to give you any information that they may have regarding my character and fitness for children or youth ministry. In consideration of the receipt and evaluation of this application by Calvary Chapel Dayton Valley, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that may at any time result to me, my heirs, or my family, because of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Signature: _____ Date: _____