

# Youth Ministry Volunteer Application

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Thank you for taking the time to help us know more about you. We want you to know that the following information will be confidential and shared only with appropriate pastoral staff.

### General Information

Name: \_\_\_\_\_ Today's date: \_\_\_\_\_

E-mail address: \_\_\_\_\_

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

Date of birth: \_\_\_\_\_ Phone Day: \_\_\_\_\_

Occupation: \_\_\_\_\_ Night: \_\_\_\_\_

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

Work Status:            part time        full time        student

Marital Status:        single married        divorced

Spouse name:

### Education

High school: \_\_\_\_\_ Year graduated: \_\_\_\_\_

College/trade school: \_\_\_\_\_ Year graduated: \_\_\_\_\_

Degree: \_\_\_\_\_ Minor: \_\_\_\_\_

Other education: \_\_\_\_\_ Year graduated: \_\_\_\_\_

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## **Personal and Spiritual History**

Write a brief testimony about how you became a Christian.

How would you describe your spiritual journey now?

What accountability do you currently have in your spiritual journey?

What people or experiences have been most significant in your growth as a Christian?

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What do you do when you have a conflict with someone? How do you handle confrontation?

## Lifestyle and Legal Concerns

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 youth ministry? (e.g. relationships, other commitments, etc.)

yes no

If yes, please explain:

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. Any special concerns can be discussed individually with the pastoral staff.

Are you using illegal drugs? yes no

Have you ever gone through treatment for alcohol or drug abuse?  
yes no

If yes, please describe:

What is your view on drinking alcohol?

Have you ever been arrested and / or convicted of a crime? yes no  
If yes, please describe:

Have you ever had sexual relations with any minor after you became an adult?  
yes no

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Have you ever been accused or convicted of any form of child abuse?  
yes no

If yes, please describe:

Have you ever been a victim of any form of child abuse? yes no  
If yes, would you like to speak to a counselor or pastor?

yes no

Are you willing to be fingerprinted for State Criminal Conviction Clearing?  
yes no

## Ministry

How long have you attended FUMC, Melbourne? \_\_\_\_\_ Are you a member?  
yes no

Describe any other ministry / church experience you have been involved with. Include dates and locations.

What spiritual gifts do you feel you have, and how would you like to use them in youth ministry?

Why do you want to do in the youth ministry?

What are some of your expectations of the youth ministry staff?

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What are your views on appropriate ways to discipline? Please list some examples.

The information contained in this application is correct to the best of my knowledge. I, undersigned, give my authorization to First United Methodist Church or its representatives to release any and all records or information relating to working with minors. First United Methodist 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 in this application will be held confidential by the professional Church staff.

Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_