

Church of the Saviour

Children's Ministry

Teen Helper Application

NAME: _____

Birthdate: _____

Address: _____

Phone Number: _____

E-mail: _____

Current Grade: _____ Age: _____

School: _____

Date of Application:

Mo. Day Yr.

Please attach a recent photo.

Thank you for your interest in being a volunteer in the Children's Ministry. Being a Teen Helper is a privilege and a great opportunity to serve the Lord, the kids, and the families coming to church. It is a team effort. Training will be provided throughout the year. Responsibilities will involve assisting your team leader and helping with other important and needed in-class projects. Consider your involvement as an adventure in seeing God work in and through your life, for His honor.

Please answer the following questions.

1. Explain how you came to know Jesus Christ as your Savior. *Include some of the following:* who helped you, what meaningful event happened, what special Bible verse/s helped you decide to become a follower of Jesus Christ, how you are different now that you are in God's family and what part Jesus has in all of this.

2. What do you do (or at least try to do) daily to help yourself grow to be more like Jesus?

3. What three people have had the greatest impact upon your life and why?

1. _____ -- _____

2. _____ -- _____

3. _____ -- _____

4. Describe the various teams, clubs or youth activities of which you are a part.

5. List hobbies or interests.

6. What experiences have you had working with younger kids (Hint: church work, babysitting, family siblings, camp work)? List past and present. What were/are your responsibilities in each area?

7. Why do you want to be a Teen Helper in the Children's Ministry? What do you hope to *contribute*?
What do you hope to *gain*?

8. Are there any circumstances involving your lifestyle or your background that would call into question you being entrusted with the care of children?

9. Which Children's Ministry area are you interested in joining? (Circle one or more)

Kids Church

Sunday School

Kids Choir

Fun-time Café

AWANA

Other: _____

10. Which age group / grade would you prefer to be serving? _____

11. If applicable, which Sunday worship hour would you prefer? (Circle one) **9:30 AM** **11:00 AM**

PERSONAL REFERENCES -- 2 needed; *not* peers; preferably: S.S. teacher, youth leader, adult.

Name: _____

Relationship: _____

Phone: _____

Name: _____

Relationship: _____

Phone: _____

RELEASE

The information contained in this application is correct to the best of my knowledge. I authorize Church of the Saviour to verify the information on this form by contacting my references and appropriate government agencies. I authorize any references, churches, or other organizations listed in this application to give Church of the Saviour any information they may have regarding my character and fitness for working with children, and I release all such references from liability for any damage that may result from furnishing such evaluations to Church of the Saviour.

Should my application be accepted, I agree to be bound by the by-laws statement of faith, and policies of Church of the Saviour, Wayne, PA, and to refrain from unscriptural conduct in the performance of my services on behalf of the church. I understand that the personal information contained on this form will be held confidential by Church of the Saviour.

Applicant's signature: _____ **Date:** _____

Parent's signature: _____ **Date:** _____

Parent's name (please print) : _____