

Elder Approval: _____
__RF ML MS F1



Ministry of Helps Application

Name: _____ Date: _____

Address: _____ Email: _____

City: _____ ST: _____ Zip: _____ Date of Birth: _____

Home Phone: _____ Cell Phone: _____

Married _____ Single _____ If married, spouse's name: _____

If single, do you live with someone? No _____ Yes _____ their name and relationship: _____

Your occupation: _____

Ministry you are applying for: _____

If you are applying for Children or Youth Ministry a background check is required.

How long have you been in regular attendance at The Church of Grace and Peace? _____

Are you currently a member of the church, if so how long? Date completed membership classes? _____

Do you know Jesus Christ as your personal Lord and Savior? Yes _____ No _____ How long have you been saved? _____

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

Have you received the Baptism of the Spirit? Yes _____ No _____ if so, do you speak in tongues? Yes _____ No _____

Which service(s) do you attend? Sunday 8:30 am _____ Sunday 10:30 am _____ Wednesday 7:00 pm _____

Please list **all** ministries you currently serve in at The Church of Grace and Peace or elsewhere: _____

Please list **all** ministries you have previously served in: _____

Do you personally know any of the church Leadership? Yes _____ No _____ If yes, please check those you know:

____ Pastor Walt Healy

____ Pastor Tom Hoffman

____ Pastor Bill Kluender

____ Pastor Maureen Healy

____ Pastor James Wheeler

____ Pastor Tom Kluender

____ Pastor Ralph Freda

____ Pastor Cheryl Baker

____ Youth Co-Pastor Gabrielle Huber

____ Pastor Jim Wehrer

____ Pastor Lisa Martin

____ Youth Co-Pastor Nathanael Huber

____ Pastor Bob Oettinger

Can you commit to occasional ministry meetings and training? _____

Signature: _____ Date: _____

Ministry Leader Printed Name: _____ Date: _____

Ministry Leader Signature: _____