



WORSHIP MINISTRY APPLICATION

Sample
www.GrowChurches.com

This application is to be completed by anyone interested in the Worship Ministry. The purpose of this application is to help us learn more about you so that we can provide opportunities for your gifting and talents to be expressed in ministry.

PERSONAL

Name (last) (first) (middle)			Birth Date / /
Address		City	State Zip
Day Phone	Evening phone	Email	
Marital status		Number of children and ages	
Present employer		What classes in the Growth Track have you completed?	
How long have you attended the (Church name)?		Date of salvation	
How often can you serve? <input type="checkbox"/> Once every week <input type="checkbox"/> Once every other week			
Are you in a Life Group? If yes, which one(s)?			
Are there any other areas of ministry at (Church name) that you are presently involved in? If yes, which one(s)?			

AREAS OF INTEREST

<input type="checkbox"/> Vocalist
What part(s) do you sing?
Can you harmonize?
<input type="checkbox"/> Musician
What instrument(s) do you play?
Can you play by ear?
<input type="checkbox"/> Sound Technician
What areas of ministry are you willing to serve in?
<input type="checkbox"/> Weekend <input type="checkbox"/> Outreach <input type="checkbox"/> Students <input type="checkbox"/> Children

CHURCH HISTORY

List any churches you have attended regularly during the past five years:

1. Church name	Dates
Pastor's Name	Church Address
Reason for Leaving	
2. Church name	Dates
Pastor's Name	Church Address
Reason for Leaving	

If necessary, please use additional sheets of paper to give us all information

EXPERIENCE

List all previous church work involving music:

Church name	Dates
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Address

Type of work performed:

List all previous non-church work involving music:

Organization	Dates
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Address

Type of work performed:

List any gifts, callings, training, education, or other factors that have prepared you for worship ministry:

Briefly share why you would like to be a part of the Worship Ministry.

COMMITMENT

I have read The Worship Ministry Handbook and agree to follow its guidelines. I have read the Honor Code and commit to keep it. I agree to a six-month commitment.

Signature

Date

REFERENCES

List two (2) references that you have known for more than a year (other than former employers or relatives):

Name	Phone
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Name	Phone
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The information contained in this application is correct and complete to the best of my knowledge. I authorize any references or churches listed in this application to give you any information and opinions they may have regarding my character and fitness for work in ministry. I release any individual, church, organization, charity, employer, reference, or any other person or organization from any and all liability for any damage that may result from furnishing such evaluations to you, and I waive any right that I have to inspect the reference provided on my behalf. Should my application be accepted I agree to be bound by the constitution, by-laws, and policies of (Church name) and to refrain from unscriptural conduct in the performances of my services on behalf of the church.

Signature

Date

Witness

Date