

**CROSSPOINT
FAMILY MINISTRIES**

**ADULT VOLUNTEER
APPLICATION**

CROSSPOINT FAMILY MINISTRIES MISSION STATEMENT

**We exist to partner with families in
making disciples of the next
generation for God's glory.**

ADULT VOLUNTEER APPLICATION

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

GENERAL INFORMATION

Name _____ Date _____

Address _____
Street City Zip

Phone (CELL) _____ (WK) _____

EMAIL Address _____

Date of Birth _____ Marital Status: ___ Married ___ Single ___ Divorced

Occupation _____ Employer _____

EDUCATION

High School _____ Yr. Graduated _____

College _____ Yr. Graduated _____

Other _____

Crosspoint Church * 1019 Tiger Blvd. * Clemson, SC 29633
(864) 653-3045 * www.crosspointclemson.org

PERSONAL

Please write a brief testimony on how you became a Christian.

Please briefly write about significant events in your life that have impacted you spiritually.

How would you describe your spiritual walk right now? (Please be specific.)

What accountability to your spiritual walk do you have?

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

Are there any special issues or concerns happening in your life right now that would have an impact on your commitment and involvement with Family Ministries? (i.e. relationships, other commitments, etc.)

LEGAL / LIFESTYLE CONCERNS

In caring for children and students, we believe it is our responsibility to seek adult volunteers who will help 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 use? If yes, please describe.

What is your view on drinking alcohol?

Have you ever been arrested and/or convicted of a crime? If yes, please describe.

Have you had any sexual relations with any minor after you became an adult?

Yes No

Have you ever been accused of or convicted of any form of child abuse?

Yes No

Are you willing to be finger printed for State Criminal Conviction Clearing?

Yes No

MINISTRY

How long have you attended Crosspoint Church?

What other ministry/church experiences have you been involved with? May we contact them as a reference (If so, please include contact information)?

What gifts do you feel you have and how would you like to use them in our Family Ministries (Nursery, Children, or Youth)?

Why do you want to serve with babies, children, or youth?

What are some of your expectations for our Family Ministries and staff?

The information contained in this application is correct to the best of my knowledge. By signing below, I give my authorization to Crosspoint Church or its representatives to release all records and information relating to working with minors. The church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as an adult volunteer.

I understand that the personal information will be held confidential by the professional church staff.

Signature _____ Date _____

CROSSPOINT FAMILY MINISTRIES BACKGROUND CHECK AUTHORIZATION

Full Name _____ Goes by _____

Maiden Name _____

Social Security # _____

Date of Birth _____

Driver's License # _____ State Issued _____

Current Address: _____

_____ County _____

APPLICANT STATEMENT

I hereby certify that I have read and completed the application. My answers are true and correct to the best of my knowledge.

I give permission for the church to maintain my photograph on file and to conduct a criminal-court background check on me now and at regular intervals. If allowed to work with students, I agree to be bound by the bylaws and policies of Crosspoint Church.

I hereby authorize all persons, schools, organizations and law enforcements agencies to supply Crosspoint Church with any information concerning my character or background in connection with working with students and I hereby release them from liability or damages which may occur as a result of their response to this request.

I authorize Crosspoint Church to supply my service record, in whole or part, to any prospective or future organization or agency with a legal and proper interest in them. I understand that if allowed to serve, that any misrepresentation made by me in the application shall be considered sufficient cause for my dismissal without notice. I have been appraised of and support the church's position regarding the problem of child abuse and neglect.

Signature _____

Date _____

If applicable, is your spouse in agreement with you applying to volunteer at Crosspoint Church?

Spouse's Signature _____ Date _____