

Ministry Team Application

This is a general application that should be completed to volunteer for any Ministry Team at Christian Church in the Wildwood. We may ask you to renew your application every few years, or whenever you take an extended break from ministry. Please complete this form and return it to your SHAPE Guide or Ministry Team Leader.

If you have not yet, we encourage you to begin the path to ministry involvement by completing our SHAPE Discovery process (found at ccw.church/grow/nextsteps).

About You						
Name:	Birt	h date:	_//	_ Choose C	ne: Ma	ale Female
Address:	Em	ail:				
City:	Zip:		Phone:			_
Church Connection						
What ministry team/s are you applyir	ng for?					
We have a variety of Ministry Teams a growing to be the person that God o			,		ecific sto	eps into
Are you a Christ-Follower?					Yes	No
For how long?						
Have you been baptized?					Yes	No
Have you completed Foundations ar	nd become a Family	Member	of CCW?		Yes	No
Have you completed the SHAPE Disc	overy Process?				Yes	No
Have you completed Servant-Leader	ship Training?				Yes	No
Who were you mentored by?						
History						
What do you do on a regular basis to	keep your spiritual	life fresh	and authent	tic?		

What type of volunteer ministry have you done in the past?

^{*} Many of our Ministry Teams require a background check in order to volunteer in. Please check with your SHAPE Guide or Ministry Team Leader to determine if you will need to complete a background check.

Permission to Obtain a Background Check

(This form authorizes the church to obtain background information and must be completed by the applicant. The church must keep this completed form on file for at least two years after requesting a background check.)

(Complete only if 18 or older).

I, the undersigned applicant (also known as 'consumer'), authorize Christian Church in the Wildwood through its independent contractor, LexisNexis, to procure background information (also known as a 'consumer report and/or investigative consumer report') about me. This report may include my driving history, including any traffic citations; a social security number verification; present and formal addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Go Church, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act. Signature Date **Identifying Information for Background Information Agency** (also known as 'Consumer Reporting Agency') Print Name: _____ Middle First Last Other Names Used: _____ Current Address: _____ Street/P.O. Box City State Zip Code County Dates Former Address: ____ County Dates Street/P.O. Box Citv State Zip Code Social Security Number: _____ Phone Number: _____ Driver's License Number: _____ State of Insurance: _____

Date of Birth: _____ Gender:____