

QUALIFICATIONS FOR VOLUNTEERS

Elevation Church Ministries is an independent fellowship of believers.

We believe the scriptures require that Christians who are in places of responsibility in the church are required to be examples in faith, conduct, and business affairs. To maintain a high standard for workers is one of the best ways to present Christ to the people of our community.

Therefore, the following guidelines will be required of any person serving at Elevation Church Ministries.

1. Must be in agreement with the "**WHAT WE BELIEVE**" statement of Elevation Church Ministries (online).
2. Been faithful in attendance of regular church services for 3 months.
3. Be able to make a minimum three-month commitment
4. Complete this Volunteer Application.
5. Be loyal to the pastors and leaders of Elevation Church Ministries.
6. Be faithful to your ministry position.
7. Complete the "**JOURNEY**" course.
8. Give earliest notice possible if you know you will be absent.
9. Be neat in your appearance and conduct at all times.
10. Attend all appropriate workers' meetings.
11. Keep your home life in order.
12. Give thirty (30) days notice when resigning position.

PLEASE READ AND SIGN:

I have read the above qualifications and pledge to keep them to the very best of my ability.

Signature

Date



**** CONFIDENTIAL ****

Volunteer Application

This application is to be completed by all applicants for any position within Elevation Church. It is being used to help the church provide a safe, secure and spiritually nourishing environment for those who participate in our programs and use our facilities. All information provided on this application will be kept confidential and will be disclosed only to Pastoral staff and the individuals listed in this application.

Name (Last)	(First)	(Middle)	Date
Address		(City)	(State) (Zip)
Telephone		Email	
Ministry Area(s) of Interest: (ex. Youth, Children, Information Center, Worship, etc.)			
Availability:			
Have you volunteered in the past? (Circle one) Yes No			
Previous Volunteer Position	Organization	Start Date	End Date
Previous Volunteer Position	Organization	Start Date	End Date

Have you accepted Christ as your Lord and Savior? Yes No

Have you been baptized in water? Yes No

Have you completed the JOURNEY class? Yes No

How long have you attended Elevation Church Ministries? _____

Describe the day that you made the decision to follow Christ:

DO YOU BELIEVE?

YES

No

- That Jesus Christ was conceived by the Holy Spirit, born of a virgin?
- That Jesus is God's Son and the only sacrifice for sin?
- That a man must be born again to receive eternal life?
- That there is an eternal reward for the believer? (Heaven)
- That there is an eternal damnation for the lost? (Hell)
- The scriptures are infallible?
- That divine healing is part of redemption's purchase and is God's will for all who believe?
- That Jesus arose bodily from the dead?
- The spiritual gifts in Romans 12 and 1 Corinthians 12 are for the believer today?

Comments:

Please list other churches (name and address) you have attended regularly during the past five years:

List any gifts, callings, training, education, or other factors that have prepared you to volunteer:

Do you have any physical handicaps or conditions preventing you from performing certain types of activities relating to volunteering? Yes No

If yes, please explain:

Have you been accused of and/or convicted of child abuse or crime involving actual or attempted sexual molestation of a minor? Yes No

If you answered yes, please explain:

Are you or have you been involved in any sexual immorality as defined in Scripture within the last year? Yes No

Do you presently have any communicable diseases (such as hepatitis, HIV or AIDS)? Yes No

If you answered yes, please identify the disease and describe your current condition and the treatment you are receiving:

Do you use tobacco-based products?
Do you drink alcoholic beverages?

Yes No
 Yes No

Comments: _____

Why do you want to be a volunteer? _____

PERSONAL REFERENCE
(Not employees or relatives)

Name: _____	Name: _____
Address: _____	Address: _____
Telephone: _____	Telephone: _____
Email address: _____	Email Address: _____
Relationship to Applicant: _____	Relationship to Applicant: _____

PASTORAL REFERENCE

(Former Senior Pastor, Associate Pastor or Ministerial Supervisor)

Name: _____
Address: _____
Telephone: _____
Email Address: _____
Relationship to Applicant: _____

APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information they may have regarding my character and fitness for children's work. I release all such references from any claim or liability for any damage that may result from furnishing such information and evaluations to you and I waive any right that I have to inspect the references provided on my behalf. **I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.**

Should my application be accepted, I agree to be bound by the constitution and by-laws and policies of Elevation Church Ministries, and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

Applicant's signature: _____ Date: _____