## Personal Information

Name Date of Birth

Address City / State / Zip

Email

Cell Phone Work Phone

Home Phone Best time to Call

Occupation

Marital Status Spouse’s name

Number of children Ages When did you begin attending Crossroads

Are you a part of a Life Group at Crossroads Have you attended the Essentials Life Group

Have you committed to membership with Crossroads?

Have you served at another church in the past? If yes, how?

Personal references

Name Name

Emergency Contact

Phone number Phone number

Phone Number

Parent(s) or Guardian(s) (Please answer if you are under 18) Name

Name

Phone number Phone number

School Year in school

*As we move together through this process of empowering you to use your time, talents and treasure to serve on a ministry team, it’s important to know that (1) we ask those seeking to join a ministry team to confess Jesus as Lord and to attend the Essentials eGroup within their first year of serving and (2) we ask those applying for a Team Lead position to have committed to membership at Crossroads.*

## Personal Inventory

How would you tell someone the “good news”? How would you describe how Jesus saved you?



How would you describe your relationship with Jesus?



What spiritual gifts, abilities, strengths, talents and passions has God planted in you?



What’s our mission at Crossroads?



What education or training have your received that would help you serve others?



## Personal Interest

What ministries have you been involved with in the past?



What areas of ministry are you currently involved in?



What’s your current time commitment to those ministries?

What’s your time availability for serving on a ministry team?



Do you have a team in mind or are you looking for direction?



Ministry Team you’re thinking of

What area of ministry (if any) are you drawn to? Why?



# Ministr y Applicatio



**n**

*For Ministry Team Positions and Team Leads*

## Personal Integrity

(*Some ministries require applicants to submit to a background check and /or fingerprinting.)*

What place does God have in your daily routine?



How do your relationships reflect Jesus’ command to love one another?



What aspect of your life would you most like to see changed?



What’s your greatest struggle with your finances?



Do you have any concerns about working with the leaders of this ministry?



**Signed Date**