

# **COACH APPLICATION**

Thank you for your interest in joining our team and for taking the time to share with us about you.

Our purpose in this application is to get to know you in order to help you find your place of giftedness for serving in the church.

We want you to know that the following information will be confidential and only shared with appropriate pastoral staff as necessary.

Completed applications may be submitted to the Student Ministry office by dropping it off at the Welcome Desk inside the main entrance at FCC, or by mailing it to us at the following address:

First Christian Church ATTN: Student Ministry Office 6900 Market Ave. N Canton, OH 44721

#### **GENERAL INFORMATION**

Name	First	Middle
Street Address		
City		
Daytime Phone		•
Evening Phone		
Email Address		
Birthdate		
Occupation		
Employer		
FAMILY INFORMATION  Marital Status: □ Single □ I  Name of Spouse:  Anniversary Date:  Children (Names and ages):	Married D	
CHURCH BACKGROUN  Are you a member of First Christ  If YES, since when? Month  If NO, how long have you been as  Number of weekends/times per  Weekend Worship Services  LifeGroup or Class  Which worship service do you us  Have you ever served in any min  MINISTRY	ian Church? Year ttending FCC? month you att ually attend?	end:





# **SPIRITUAL INFORMATION**

Have you accepted Jesus Christ as your Lord and Savior, and are you committed to having the character of Jesus live through you? $\square$ Yes $\square$ No						
Have you been baptize						
When and how did you	become a Christian?					
Describe the difference	e in your life before you	met Christ and no	w that you know Him:			
Do you have a daily qui	et time?	No				
What have you been do	oing intentionally to gro	ow spiritually this p	ast year?			
How would you describ	e your current spiritua	I life? (Check ALL tha	nt apply)			
☐ Boring		_	☐ Invigorating 			
_	☐ Passionate		☐ Inspiring —			
LEADERSHIP EX	PERIENCE					
Have you ever been in a lf yes, please explain: _						
Have you ever led a sm If yes, please explain: _						
Have you ever had to ro						





## **TEMPERAMENT**

Tell us about your preferences and personality. Please place your personal observations
about yourself and your preferences on the following lines:

•	,	, ,			0			
Introverted								Extroverted
	3	2	1	0	1	2	3	
Routin								- Variety
	3	2	1	0	1	2	3	
Feeler								Thinker
	3	2	1	0	1	2	3	
Behind the S	cenes		1					Up Front
		3 2	'	U		1	2	3
Work With In	ndividu	als	 2 1	0	1	L	ead a G	iroup or Crowd
People-orie		3 2						Task-oriented
SELF-DES	CRIPT	ION						
Please circle describe you		ır words tha	t best descri	ibe you. (	Cross ou	t the four	words t	hat least
Trus	stworth	ıy Depei	ndable	Active	Com	oassionate	e Ro	eliable
Pu	nctual	Self-Sta	rter Fle	xible	Laid-B	ack Q	uick Th	inker
Spo	ntaneo	us Decis	sive Tea	chable	Tear	n Player	Hum	norous
Thou	ghtful	Solitary	Leader	Cau	tious	Risk-Tak	cer	Patient
Reflect	ive	Honest	Organized	Cre	ative	Disciplin	ned	Faithful
Please list ar	ny perso	onal weakne	sses or area	s where	you reco	ognize a ne	eed to g	row:
Indicate you	-	-						
<del></del>	nistrati	on	_ Leadership			Discernme	nt	
Mercy	•		_ Encourage	ment	s	Service		
Evang	elism		_ Prophecy		F	aith		
Sheph	erding		_ Giving		1	Teaching		
Helpir	ng		_ Wisdom		F	(nowledge	!	
Other	•							





### **LEGAL AND LIFESTYLE QUESTIONNAIRE**

Because of our radical commitment to Christ and our unconditional devotion to students, we unapologetically seize every opportunity to make the conditions right so students can grow spiritually, emotionally, and numerically. The following questions are not ones that we like to ask but ones we need to ask in order to continue to protect the emotional and spiritual environment of our student ministry. If you answer "yes" to any of the following questions, please explain your answer on a separate sheet of paper and attach to this application.

Do you have any medical conditions that might be hazardous to others? $\Box$ Yes $\Box$ No
Have you, at any time, been involved in or accused, rightly or wrongly, of sexual abuse, misconduct, or neglect? $\square$ Yes $\square$ No
Have you ever been accused or convicted of possession or sales of controlled substances or of driving under the influence of alcohol or drugs? $\square$ Yes $\square$ No
Are you currently using any illegal substances?
Have you ever been arrested or convicted for any criminal act more serious than a traffic violation? $\square$ Yes $\square$ No
Have you ever been involved romantically or sexually with any student, or had sexual relations with any minor after you became an adult? $\Box$ Yes $\Box$ No
Have you ever been a victim of any form of child abuse? $\Box$ Yes $\Box$ No If yes, would you be willing to discuss this confidentially with a pastor? $\Box$ Yes $\Box$ No
Have you ever been asked to step away from any ministry or work with students or children in any setting, paid or volunteer? $\Box$ Yes $\Box$ No
Is there anything about your past or current life that might be a problem if we found out about it later? $\Box$ Yes $\Box$ No
What is your view on the following issues:
Drinking alcohol:
Smoking:
Do you struggle with using foul language?





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Tell us why you feel led to become a part of t	he student ministry team at FCC:
REFERENCES	
Please list two people who could be characte members or FCC staff as references.	r references for you. Please do not list family
1. Name:	Phone
2. Name:	Phone
BACKGROUND CHECK INFORMAT	ION
checked in order to ensure that we are provide	tudent ministry volunteers will be background ding for the safety and integrity of our students ant to be as diligent as possible to protect our ts of your background check will be kept
Social Security #:	
Driver's License #:	

Driver's License Issuing State: \_\_\_\_\_



#### WAIVER AND RELEASE

I, the undersigned, give my authorization to **First Christian Church** representatives - hereinafter referred to as "The Church" - to verify the information given by me on this application form. The Church may contact appropriate government agencies as deemed necessary in order to verify my suitability as a church youth / student ministry worker. I understand that this will include a criminal records check for arrests, convictions, or other information the local, state, or federal criminal enforcement agencies may have regarding me, and I release such information to the following:

First Christian Church 6900 Market Avenue N. North Canton, OH 44721 330.456.2600

I am willing to request and submit to The Church background reports on myself from the (state) Department of Social Services central registry. I release The Church and aforementioned agencies from any liability or damages resulting from the acquisition of this information. I waive any present or future claims of privacy resulting from this information for qualifications of volunteer work with First Christian Church.

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 The Church any information (including opinions) that they may have regarding my character and fitness for youth ministry service. In consideration of the receipt and evaluation of this application by The Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that may at any time result to me, my heirs, or family, because of compliance or any attempts to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the constitution, statement of faith, and policies of The Church and to refrain from conduct unbecoming to Christ in the performance of by services on behalf of The Church. If I violate these guidelines, I understand that my volunteer status may be suspended or terminated at any time and without warning. By signing this application, I state that all of the information given about myself is true.

I further state that I have carefully read the foregoing release and know the contents thereof, and I sign this release as my own act. This is a legally binding agreement which I have read and understand.

Signature		
Print Name	 	
Witness	 	
Date:		