

## SOTWC Youth Leader's Application

\_\_\_\_\_

name

\_\_\_\_\_

date

\_\_\_\_\_

address

\_\_\_\_\_

phone #

\_\_\_\_\_

birthday

1. Write a brief testimony on how and when you became a Christian.
2. Are you Spirit filled with the initial physical evidence of speaking in other tongues? Give a brief testimony. If the answer is no, you are not disqualified from youth ministry.
3. How would you describe your daily devotional and prayer life? Are you growing closer to God daily?
4. What do you do when you have a conflict with someone? How do you handle confrontation?
5. Is there any special issues in youth life that will prohibit your commitment to our youth ministry? (work, relationships, other commitments)
6. Do you use drugs, alcohol, or nicotine? Explain?
7. Have you ever been accused or convicted of any form of child abuse? Explain?

8. Do we have your full cooperation in confirming your answers to question 7 by all legal means necessary.

10. What spiritual gifts do you feel you have, and how would you like to use them in youth ministry?

11. Why do you want to do youth ministry?

12. What do you expect from the Youth Pastor?

The information I have given in this application is correct to the best of my knowledge. I give Spirit of the Word Church authorization to release any records and information related to working with minors. I understand that the personal information in this application will be held confidential by the professional church staff.

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
date