



Date of Approval _____

MPJ1:27 — Men's Ministries Volunteer Application

*Learn to do good. Seek justice. Help the oppressed. Defend the cause of orphans.
Fight for the rights of widows. — Isaiah 1:17 (NLT)*

*Pure and genuine religion in the sight of God the Father means caring for orphans and widows
in their distress and refusing to let the world corrupt you. — James 1:27 (NLT)*

This application is to be completed by all those desiring a volunteer ministry position in MPJ1:27, Ministry for Widows, Widowers and Single Parents. It is being used to help the church provide a safe and secure environment for those individuals who trust us and participate in our programs.

All information is vital. Please give complete answers.

Questions? Please contact Clark Simpson, Doug Seelbach or Mickey Foley via the church office at (765) 642-2000.

Personal Information

Name _____
Last First Middle

Birth Date: Month _____ Day _____ Year _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Email Address: _____

Do you have any medical training or are you CPR certified? _____

Marital Status _____ Spouse _____

Children (names and ages) _____

Hobbies and interests _____

Employment Information

Employer _____

Address _____

City _____ State _____ Zip Code _____

Work Phone (_____) _____

Type of work you do _____

Personal Faith Information

How has Christ transformed your life? _____

Are you a regular attender of Madison Park Church of God? _____ Yes _____ No

If yes, when did you begin as a regular attender? (Month/Year) _____

Please check the service or groups you regularly attend:

Saturday 6:00pm Sunday 9:00am Sunday 10:45am Wednesday 6:30pm Other _____

Leadership Information

What leadership/volunteer experience have you had? Previous church work or other work involving adult ministries? (Identify place, type of work, supervisors).

List any gifts, training, education, or experience you have that would pertain to working with adults:

The greatest strength I bring to MPJ1:27, Ministry for Widows, Widowers and Single Parents is:

The greatest weakness I bring with me to MPJ1:27, Ministry for Widows, Widowers and Single Parents is:

The questions listed below are a part of our interview process in order to help provide a safe and secure environment for our Men's Ministry MPJ1:27, Ministry for Widows, Widowers and Single Parents; Pastoral Staff and Men's Ministry Leadership hold all information strictly confidential. Answering yes to any of the questions may not necessarily preclude your involvement in the Widow, Widowers and Single Parents Ministries. Thank you for your cooperation.

Is there any circumstance or pattern in your life which would make it inappropriate for you to serve with Widows, Widowers and Single Parents Ministries or would compromise the integrity of Madison Park Church of God? _____ Yes _____ No

Are there any circumstances involving your lifestyle or your background that would call into question your ability to work with Widows, Widowers and Single Parents? _____ Yes _____ No

Have you had any experiences in your life that better equipped you for a productive ministry with Widows, Widowers and Single Parents? _____ Yes _____ No

Have you ever been denied the opportunity to work in a ministry at any other church or institution? _____ Yes _____ No

Have you been under treatment for any physical or psychological conditions over the past two years?

_____ Yes _____ No

Are there any physical or personal factors which may limit your responsibilities in MPJ1:27, Ministry for Widows, Widowers and Single Parents?

_____ Yes _____ No

If you answered yes to any of the questions, please explain: _____

Please complete and sign the attached Authorization and Release Form.

The information contained on this application is correct to the best of my knowledge. I understand that any omission of material fact on this application may be grounds for rejection of this application. I give permission for this information to be updated periodically as needed.

Should my application be accepted, I agree to cooperate with the church staff and Men's Ministry Leaders. I will follow the policies of Madison Park Church of God and I will refrain from unscriptural conduct in the performance of my services on behalf of Madison Park Church of God and MPJ1:27, Ministry for Widows, Widowers and Single Parents.

Signature _____ Date _____

A copy of your criminal history information will be requested from the appropriate authorities. If you would be willing to personally offset part of this cost, please include a check for \$10 made out to Madison Park Church of God with your completed application. Fee enclosed? Yes No Check # _____

***** For Office Use Only *****

1) Background Check Received: _____

2) Further follow-up indicated: _____

