

Ministry Application

for Student Leaders

Youth Version
(if you are 18 or over, please complete the Adult Version)

This application may be completed online at <http://queensway.org/app>

Thank you for your interest in ministry at Queensway Baptist Church! The purpose of this application is to get to know you better so we can partner with you as you discover how God has gifted you for service in the Kingdom of God. This information will be kept confidential and will only be shared with Queensway Baptist Church ministry personnel responsible for screening volunteers. *If you have already filled out this application in a previous year, you may fill out the abbreviated Renewal Application.*

Personal Information

Full Name: _____ Date of Birth: _____ / _____ / _____
M D Y

Address: _____ Email: _____

Home Phone: _____ Cell Phone: _____

School you currently attend: _____ Grade: _____

Parent/Guardian Information

Full Names of Parent(s): (1) _____ (2) _____

Parent Email Address(s): (1) _____ (2) _____

Parent Cell Phone(s): (1) _____ (2) _____

Are your parents supportive of your ministry involvement? Yes No If no, please explain:

Church Affiliation

What year did you start attending Queensway Baptist Church?
(if less than 1 year, include the month) _____

What other churches have you attended in the last 5 years?

1) _____ Dates: _____

2) _____ Dates: _____

CPR/First Aid

Are you CPR/First Aid certified? No Yes Certification Level: _____ Cert. Date: _____

Personal

Do you consider yourself a Christian? Yes No

Why do you want to serve in the ministry/ministries you are applying for?

What extracurricular activities are you involved in?

What talents, spiritual gifts, abilities, and/or passions do you possess that you feel could be used in a positive way within the ministry of QBC?

Is there anything else you would like us to know that would impact your role as a student leader?

References

Please provide the names of three individuals (excluding relatives) who could provide a reference for you. Include at least one reference from outside Queensway Baptist Church. Ideal references have known you for at least a year, are able to identify your strengths and weaknesses, and can describe your background.

- 1) Name: _____ Relationship: _____
Email: _____ Phone: _____
- 2) Name: _____ Relationship: _____
Email: _____ Phone: _____
- 3) Name: _____ Relationship: _____
Email: _____ Phone: _____

Photo & Video

From time to time, QBC may wish to use photos and/or videos of you **without identifying information** on bulletin boards, the QBC website, flyers, the QBC Facebook page, etc. We do this to give a personal touch to our communication and to celebrate what God is doing in our ministry. If you wish to have photos and/or videos of you removed from public display, please contact the church.

Yes, QBC may use photos/videos of me *without identifying information*

No, QBC may not use photos of me

Applicant's Statement

I declare by my signature below that the information contained in this application is true and accurate to the best of my recollection and knowledge. I further authorize Queensway Baptist Church to contact all references listed, and to verify all information through background checks if required.

I commit to follow the expectations detailed in the [Conduct & Behaviour Expectations for Student Leaders](#) document.

When and if I am working in a ministry targeted to **children or youth**:

I commit to follow the expectations, policies, and guidelines of working with children as detailed in the [Policies, Procedures, & Guidelines for Student Leaders in Children's Ministry](#) document.

Your Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____