

Hawthorne Gospel Church

Children's Ministry

Teen Service Questionnaire for 12-17 Year Olds

(Please write legibly and answer ALL questions)

Name: _____ Address: _____ _____ E-Mail: _____ School: _____	Date: _____ Telephone #: (H) _____ (C) _____ Date of Birth: / / Grade: _____
--	--

Parent's/Guardian's Names: _____

Sibling's Names: _____

Are you a U.S. citizen? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____

If yes, please give date(s) and kind(s) of conviction:

Are you a Member of HGC? (Have you completed the Membership Class?) Yes ___ No ___

How long have you attended HGC? _____

TESTIMONY: Please describe your relationship with God and when/if you accepted Jesus as your personal Savior. Use another sheet of paper if necessary.

Have you served in other areas of ministry at HGC (i.e. Worship Community, Youth Group, etc)?

Why do you want to help in Children's Ministries?

Teen Service Questionnaire, *cont'd*

Do you want to serve to fulfill "Christian Service" required by your school? Yes ___ No ___

If Yes, how many hours do you need this year? _____

In which ministry would you like to serve?

Infant / Toddler:	<input type="checkbox"/> 8:30 a.m.	<input type="checkbox"/> 10:00 a.m.	<input type="checkbox"/> 11:30 a.m.	<input type="checkbox"/> 5:00 p.m.
<input type="checkbox"/> Sunday School	<input type="checkbox"/> Skippers	<input type="checkbox"/> Tree Climbers	<input type="checkbox"/> VBS - which depart.: _____	
<input type="checkbox"/> Club 208	<input type="checkbox"/> Scooters	<input type="checkbox"/> Stockade	_____	
<input type="checkbox"/> Children's Church (Pre-K)	<input type="checkbox"/> Pioneer Girls	<input type="checkbox"/> Special Needs	_____	
<input type="checkbox"/> Other				

How often can you help out?

Every week Every other week Once a month

Please list 2 or 3 adults from HGC that know you, and can be a reference for you (*not your parents*):

1) _____
 2) _____
 3) _____

Each teen who serves in the Children's Ministries at HGC must:

1. *Be a Christian believing that Jesus Christ is his/her Savior and Lord.*
2. *Attend HGC services regularly.*
3. *Have a heart for children and desire to see them come to Christ.*
4. *Commit to serving for at least one full year.*

Signature of Applicant: _____

Date: _____

Signature of Parent/Guardian of Applicant: _____

Date: _____

NOTE: Please complete EVERY section. An incomplete form will only delay service. Thank You!

Staff Use:

Date returned: _____

Interviewed? Yes No Date: _____

Comments: _____

Possible Positions: _____

Position Given: _____

Signature: _____

