SERVANT APPLICATION

Name:				
Address:				
Daytime phone:		Evening	Phone:	
E-mail:				
Occupation:				
Employer:				
Previous work exper	rience:			
Previous service or v	rolunteer experience:			
Special interests, hol	obies, and skills:			
When is the best tim	e for you to serve?	Days	Evenings	Weekends
	an you make to this s			
Why would you like	to serve?			
What qualities do yo	ou have that would he	lp you to se	erve in our church?	
We, as a church, dor child or youth with t	n't practice physical p this understanding? _		. How would you di	scipline a
Would you be availa	ıble for periodic serva	nt training	sessions? I Yes I	No
	Signature of Applic	cant	Da	te