APPLICATION FOR STUDENT MINISTRY



Please download, print, complete, and sign this form and return it, with elder approval, to Pastor Ryan Trzeciak.

Name	Last	First		loday's Date
Addre	Number Street		City	State Zip
			Work Phone (_
E-ma	il		Date	of Birth
Occuj	pation			
Have	you trusted Jesus as your L	ord and Savior? □	Yes □ No How	Long?
How	long have you been attending	ng Eastridge Baptist C	Church?	
Have	you attended Eastridge 101	? □ Yes □ No		
Are y	ou a member of Eastridge F	Baptist Church?	es 🗆 No How Long	<u>;</u> ?
Minis	STRY INTEREST(S)			
	Guys' Bible Study	☐ Youth Pra	aise	nd/Audio Visual
	Girls' Bible Study	☐ Outreach	☐ Coor	rdinating/Preparing Food
	Bible Quizzing	☐ Special E	events	ninistration/Organization
	Music			
Васк	GROUND INFORMATION (N/	A if under 18)		
reprod	llowing questions are designe ach. We acknowledge the sens entiality.			p 128 Student Ministries above h the highest level of
	re anything in your backgro or) that would raise any que		_	ctim of abuse or mistreatment as dents/teenager \(\square\) Yes \(\square\) No
Have	you ever been accused of a	ny improper act relati	ng to abuse or mistreatme	ent of a minor? Yes No
Have	you ever been convicted of	any crime? ☐ Yes	□No	
	ou willing to allow Eastridg ding identity verification, p		9	onfidential background check ☐ Yes ☐ No

Please concisely explain the gospel.		····		
Define the lordship of Jesus and describe how it is displayed in your life.				
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All the information on this application is true and correct to	o the best of my knowledge			
An the information on this application is true and correct to	o the best of my knowledge.			
Signature		Date		
Elder/Pastor Approval				
Signature	Printed Name	Date		
Comments				