Servant Leader Application
Dwell Student Ministries

DATE: ____________________

PERSONAL INFORMATION

LAST NAME: ____________________ FIRST NAME: __________ MIDDLE INITIAL: ______

MALE ☐ FEMALE ☐

E-MAIL ADDRESS: ______________________ MAIDEN NAME: ____________________

HOME PHONE: ______________________ CELL PHONE: ______________________

SERVICE INFORMATION

1. FOR WHICH STUDENT MINISTRY ARE YOU APPLYING?

Oasis (Infant-5th grade) ☐
Middle School (6th-8th grade) ☐
Renegade ☐

2. AT WHICH TIME & LOCATION WOULD YOU LIKE TO VOLUNTEER? (CHECK ALL THAT APPLY)

**Oasis & TNT:**
- Main Campus 10:00am ☐
- Main Campus 5:30pm ☐
- 4th Street 10:00am ☐
- Warehouse 10:00am ☐
- Warehouse 5:30pm ☐
- East 10:30am ☐
- West 10:00am ☐
- VBS (go to next pg.) ☐
- TNT Camp (go to next pg.) ☐
- Parent Meeting (go to next pg.) ☐
- Discipleship Café (next pg.) ☐
- Saturday AM Mtg. (next pg.) ☐

**Middle School:**
- Cell group / home church ☐
- WAM – Warehouse 10:00am ☐
- JAM 1 – Main Campus 10:00am ☐
- JAM 2 – Main Campus 5:30pm ☐
- Blow Out – Main Campus 7:00pm ☐
- every other Friday

**Renegade:**
- Pre-K – 5th grade at South Side ☐
- Pre-K – 5th grade at Harambee ☐
- Pre-K – 5th grade with Ren 29 at Building X ☐

ADDITIONAL NOTES:
(Please make any necessary notes e.g. you are applying for a specific classroom, ACCESS, a specific role in VBS, etc.)

3. HOW FREQUENTLY ARE YOU CONSIDERING SERVING?

WEEKLY ☐ BI-WEEKLY ☐ MONTHLY ☐ UNSURE ☐

4. WILL YOU SERVE FOR THE REQUIRES TERM OF SERVICE? (yes or no)

**Oasis:**
- 1 year? Yes ☐ No ☐

**Middle School:**
- Cell Group – 3 years? Yes ☐ No ☐
- CT – 1 year? Yes ☐ No ☐

**Renegade:**
- 1 year? Yes ☐ No ☐

5. FOR MIDDLE SCHOOL AND ALL RENEGADE ONLY:
DO YOU HAVE AUTO INSURANCE/LIABILITY COVERAGE? Yes ☐ No ☐

Driver’s License Number: ____________________

6. ARE YOU BEING RECRUITED TO LEAD IN A DWELL STUDENT MINISTRY? Yes ☐ No ☐

If so, by whom: ____________________
SPIRITUAL BACKGROUND

1. WHAT DO YOU BELIEVE CONSTITUTES BECOMING A CHRISTIAN?

2. DO YOU HAVE A PERSONAL RELATIONSHIP WITH JESUS CHRIST?  Yes ○  No ○
   IF YES, FOR HOW LONG? _______________________

3. DESCRIBE YOUR PRIOR INVOLVEMENT IN CHRISTIAN MINISTRY. (i.e. evangelism, discipleship, serving, leading, teaching, etc.)

DWELL BACKGROUND

1. HOW LONG HAVE YOU ATTENDED DWELL COMMUNITY CHURCH? _________________________
2. WHAT HOME GROUP DO YOU ATTEND? _________________________
3. HOW LONG HAVE YOU CONSISTENTLY ATTENDED YOUR CURRENT GROUP? __________________
4. DO YOU AGREE WITH THE DWELL STATEMENT OF FAITH?  Yes ○  No ○
   http://www.xenos.org/aboutxenos/ourfaith.htm

5. ARE THERE ANY DWELL POLICIES WITH WHICH YOU DISAGREE?  Yes ○  No ○
   If yes, please explain.

6. HAVE YOU SERVED IN OTHER DWELL MINISTRIES?
   If yes, please list.

CELL GROUP / HOME GROUP LEADER REFERENCE

PLEASE LIST THE HOME GROUP OR CELL GROUP LEADER, OTHER THAN SPOUSE OR FAMILY, WHO IS QUALIFIED TO SPEAK OF YOUR SPIRITUAL EXPERIENCE, CHARACTER, AND CHRISTIAN SERVICE.

NAME: ______________________________
THE QUESTIONS BELOW ARE PART OF THE APPLICATION PROCESS TO HELP PROVIDE A SAFE AND SECURE ENVIRONMENT FOR OUR CHILDREN. IT IS OUR DESIRE TO WORK WITH YOU TO FIND A MINISTRY THAT IS FULFILLING AND SUITED TO YOUR STRENGTHS AND EXPERIENCES. THANK YOU FOR YOUR HONESTY.

1. HAVE YOU EVER BEEN ARRESTED AND/OR CONVICTED OF ANY OFFENSE AGAINST THE LAW? IF YES, PLEASE EXPLAIN. INCLUDE DATES AND DETAILS OF MOVING VIOLATIONS OVER THE LAST 3 YEARS.
   Yes ☐  No ☐

2. HAVE YOU EVER COMMITTED OR BEEN ACCUSED, CHARGED OR ALLEGED TO HAVE COMMITTED ANY ACT OF NEGLECTING, ABUSING OR MOLESTING ANY CHILDREN? THIS INCLUDES SEXUAL MISCONDUCT OR SEXUAL ADVANCEMENTS WITH MINORS? IF YES, PLEASE EXPLAIN IN DETAIL, PROVIDING DATE AND PLACE OF INCIDENT.
   Yes ☐  No ☐

3. HAVE YOU EVER BEEN SEXUALLY ATTRACTION TO PRE OR POST-PUBESCENT CHILDREN? IF YES, PLEASE EXPLAIN IN DETAIL.
   Yes ☐  No ☐

4. WE VALUE HIGH MORAL CHARACTER IN PEOPLE WHO WILL BE LEADING IN STUDENT MINISTRY POSITIONS. PLEASE READ 1 TIMOTHY 3 AND TITUS 1 AND DESCRIBE YOUR MORAL CHARACTER AS IT RELATES TO THESE PASSAGES. INCLUDE ANY PREVIOUS OR CURRENT unresolved MENTAL ISSUES (EX. SEXUAL RELATIONSHIP OUTSIDE OF MARRIAGE, ADDICTIONS, ETC)
APPLICANT’S CERTIFICATION AND AGREEMENT

I HEREBY CERTIFY THAT THE FACTS SET FORTH IN THIS INITIAL APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT DISCOVERY OF FALSIFICATION OF ANY STATEMENT OR SIGNIFICANT OMISSION OF FACT MAY PREVENT ME FROM OBTAINING A VOLUNTEER POSITION OR MAY SUBJECT ME TO IMMEDIATE DISMISSAL FROM THAT POSITION. I AUTHORIZE DWELL COMMUNITY CHURCH TO VERIFY ALL DATA GIVEN IN MY APPLICATION AND MY INTERVIEW WITH THE HOME GROUP LEADER REFERENCE LISTED IN THIS APPLICATION.

I HAVE CAREFULLY READ AND UNDERSTAND THE ABOVE STATEMENT AND THE VOLUNTEER HANDBOOK OR MANUAL AND AGREE TO COMPLY WITH THE STATED REQUIREMENTS AND EXPECTATIONS.

____________________________________________   _______________
SIGNATURE OF APPLICANT   DATE

THE FOLLOWING IS NOT APPLICABLE TO STUDENTS UNDER 18 YEARS OF AGE

NATIONAL CRIMINAL FILE BACKGROUND CHECK
AUTHORIZATION / CONSENT FORM

DWELL COMMUNITY CHURCH WILL CONDUCT A NATIONAL CRIMINAL FILE BACKGROUND CHECK ON ALL VOLUNTEER APPLICANTS. PLEASE READ THIS AUTHORIZATION/CONSENT FORM, COMPLETE THE INFORMATION AT THE BOTTOM IN ITS ENTIRETY AND RETURN THE FORM WITH THE COMPLETED APPLICATION.

DURING THE APPLICATION PROCESS AND AT ANY TIME DURING THE TENURE OF MY VOLUNTEER SERVICE WITH DWELL COMMUNITY CHURCH, I HEREBY AUTHORIZE CHOICEPOINT SERVICES INC., ON BEHALF OF DWELL COMMUNITY CHURCH TO PROCURE A BACKGROUND REPORT, WHICH I UNDERSTAND MAY INCLUDE INFORMATION REGARDING MY CHARACTER, GENERAL REPUTATION, OR PERSONAL CHARACTERISTICS. THIS REPORT MAY BE COMPILED WITH INFORMATION FROM COURTS RECORD REPOSITORIES, DEPARTMENTS OF MOTOR VEHICLES, PAST OR PRESENT EMPLOYERS AND EDUCATIONAL INSTITUTIONS, GOVERNMENTAL OCCUPATIONAL LICENSING OR REGISTRATION ENTITIES, BUSINESS OR PERSONAL REFERENCES, AND ANY OTHER SOURCE REQUIRED TO VERIFY INFORMATION THAT I HAVE VOLUNTARILY SUPPLIED. I UNDERSTAND THAT I MAY REQUEST A COMPLETE AND ACCURATE DISCLOSURE OF THE NATURE AND SCOPE OF THE BACKGROUND VERIFICATION TO THE EXTENT SUCH INVESTIGATION INCLUDES INFORMATION BEARING ON MY CHARACTER, GENERAL REPUTATION, OR PERSONAL CHARACTERISTICS.

____________________________________________   _______________________
SIGNATURE OF APPLICANT   DATE

Administrator will call for Social Security Number.

______________________________   _______________________
DATE OF BIRTH

PRINTED NAME: ____________________________

STREET ADDRESS: __________________________

CITY, STATE, ZIP: __________________________
**PLEASE RETURN APPLICATION AND RELEASE FORM TO:**

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