

## **Volunteer Application Form**

FOR OFFICE USE ONLY							
Date Received							
Check							
1st Contact							
2nd Contact							
Interview							

							<u>                                     </u>				
Mark Areas of Intere  Altar Care Team  Audio/Sound  Calligraphy  Communion Helpers  Separate application  Name (Last)	s required	RBTC	Workers panish Ministry of these a nunication	/ areas r		Music Depart	c & Gift St t ers <i>Church me</i>	<i>embershi</i> Prayer (	☐ We-Ca ☐ Word F Center	Production re Center Partner Club (Call	
☐ Male ☐ Female					ried Date of Birth (mm/dd/yy)						
Spouse's Name				Names of Children Living in Residence–List Ages							
Address				City	City State					ZIP	
Telephone Numbers											
Home ( ) Cell ( )				Email Address							
Best Time to Contact You					Preferred Method of Contact ☐ Call ☐ Text ☐ Ema					Text □ Email	
Date of Salvation	Date of Holy Spirit Baptis				ember Yes				low long have you attended RBC?		
Previous Church Attended City						State	Pastor's	astor's Name			
Current RBTC Student	☐ Gradu	ate □ \	ear Gra	aduate	 ed		!				
(Being a past or present s	tudent is NOT	a requirement to v	olunteer.	)							
Do you attend School o	of the Bible o	n a regular basis	? 🗆	Yes	□ No	If yes, which	ch class?				
Do you attend a LINK T	eam on a re	gular basis?	Yes	□ No	o If y	es, which one	∍?				
Are you currently involved in other volunteer positions at Rhema Bible Church?   Yes   No  If yes, please list:											
Have you previously be If yes, please list:	en involved	n volunteer posi	tions at	Rhem	na Bibl	e Church?	□ Yes	□ No			
Are you currently involved in any other ministry other than Rhema Bible Church?   Yes  No If yes, please list:											
Have you ever be accu of a minor? Have you b											
Is there any circumstance or pattern in your life, past or present, which would compromise the integrity of Rhema Bible Church?											
List any qualifications of	r skills you h	ave in the area(s	s) indica	ted at	oove.						
Mark the times you are		volunteer? Sun	day 🗆	AM	□ PM	Wednesday	<b>,</b> □PM	Saturo	lay □ AM	□PM	
Applicant Signature of edge. Should my applistand that I represent F	cation be ac	cepted, I agree	to subm	it mys	self to	the volunteer	r expectat	tions co	ommunicated	d to me. I also under-	
Applicant Cianatura:		Data									

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