



Central Baptist Church  
Children's Ministry  
INTERN Application

Date: \_\_\_\_\_

**BASIC INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred Method of Contact: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Occupation/Employment/School: \_\_\_\_\_

Are you certified in:     CPR         First Aid

Do you speak another language? If yes, list which ones. \_\_\_\_\_

\_\_\_\_\_

Do you play an instrument? If yes, list which ones. \_\_\_\_\_

\_\_\_\_\_

**CHURCH INFORMATION**

What churches have you regularly attended in the last 5 years? \_\_\_\_\_

\_\_\_\_\_

Did you volunteer at any of them? \_\_\_\_\_

\_\_\_\_\_

Contact Person (name/phone #) at Church you volunteered at: \_\_\_\_\_

\_\_\_\_\_

How long have you attended Central? \_\_\_\_\_





**PERSONAL BACKGROUND:**

Have you ever been convicted of a crime? \_\_\_\_\_

Have you ever been abused physically, sexually, emotionally, or verbally? When? Have you seen a professional counselor? Is there a pastor or staff member you would be willing to talk with about this?

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Do you have any health issues that may affect your ability to work with children?\_\_\_\_\_

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Are there any addictions or habits in your life that would hurt your testimony or the testimony of the church?

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List at least two references including contact information. (cell number and email)

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**ATTACH A RECENT PHOTO.**