

Membership Application

The information contained in this application will be kept confidential. It will be discussed only to those who have a genuine need to know in order to carry out their responsibilities at North Central Assembly of God Church, or as required by law.

1. PERSONAL INFO

NAME HOME PHONE ()

ADDRESS WORK PHONE ()

CITY STATE ZIP MOBILE # ()

BIRTHDATE / / E-MAIL

OCCUPATION / PLACE OF WORK

SPOUSE'S NAME

STATUS: Single Engaged Married Remarried Single again Living w/Partner Widowed

CHILDREN'S NAMES & AGES

Last name	First Name	Age	Relationship

2. CHURCH EXPERIENCE

How long has North Central been your church home? _____

Briefly describe your relationship with Jesus? _____

Have you been baptized in water since becoming a follower of Jesus? YES NO

If yes, (explain) _____

If no, (explain) _____

Are you open to the biblical experience referred to as the baptism in the Holy Spirit? YES NO

If No, please explain _____

Is there any doctrine taught by a teacher or Pastor at North Central w/which you disagree YES NO

If yes, (please explain) _____

Are you a member of North Central YES NO Since ? ____/____/____

Have you completed our Discover Membership series? YES NO DATE: ____/____/____

Which do you consistently attend? (Please check) Weekend Services Family Night Wednesday

Small Groups Kids Ministry Teaching: Sunday School Hour



What ministries at North Central Assembly are you currently serving in or served in the past?

_____ Since ? ____/ ____/ _____ Leader? YES NO

_____ Since ? ____/ ____/ _____ Leader? YES NO

_____ Since ? ____/ ____/ _____ Leader? YES NO

What is your previous church affiliation, if any?

Church Name _____ City, State _____ Phone _____

Pastor's Name _____ Your Length of Time at the Church _____

Reason for Leaving _____

3. FAITH STORY

Try to briefly describe your spiritual journey...

Use just a few words or phrases that will BEST describe the following...

...life attitudes and values before meeting Jesus

...circumstances surrounding the beginning of your relationship with Jesus

...your current values & attitudes since placing your faith in Jesus



Abilities

Rate your interest, experience or skill in any of the following on a scale of 1 to 5.

(5=highly qualified; 3=average exposure; 1=no experience)

“THERE ARE DIFFERENT ABILITIES TO PERFORM SERVICE...” I Corinthians 12:6

_____ Leading a small group	_____ Hosting / Hospitality	_____ Organizing	_____ Drama
_____ Counseling / crisis care	_____ Food preparation	_____ Computers	_____ Music
_____ Teaching large group	_____ Driving a bus / van	_____ Graphic Design	_____ Photography
_____ Evangelism	_____ Painting / Building	_____ Finances	_____ Video
_____ Writing / grammar	_____ Mechanical	_____ Research	_____ A/V Tech
_____ Interior Design	_____ Medical care	_____ Working w/Adults	Other _____
_____ Working w/Nursery	_____ Working w/Elementary	_____ Web page design	_____
_____ Working w/Preschool	_____ Working w/Teenagers	_____ Administration	_____

The following are my strongest skills:

- 1.
- 2.
- 3.

Other skills I'm learning and / or working on are:

- 1.
- 2.
- 3.

Personality

“NO ONE CAN REALLY KNOW WHAT ANYONE IS THINKING OR WHAT HE IS REALLY LIKE EXCEPT THAT PERSON HIMSELF.”

I Corinthians 2:11

Circle the number that best describes where you fall on the continuum.

a. I prefer to use my time...	tackling my do-list	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	building relationships
b. I do my best work...	on my own	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	with the help of a team
c. When a need arises I am inclined to...	act to fix it	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	stop to talk about it
d. I feel more comfortable helping people by...	doing things for them	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	listening to their problems
e. People tend to see me as more...	task-oriented	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	people-oriented
f. At the end of the day, I feel better having...	accomplished a goal	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	gotten to know someone
g. I prefer to...	wing it	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	master the plan
h. I like it when my superiors give me...	the general idea	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	specific instructions
i. I love...	a lot of change	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	a nice routine
j. I feel good at night	not knowing what I may do tomorrow	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	having a clear idea
k. People tend to see me as more...	spontaneous	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	structured
l. I couldn't live without my...	freedom	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	PDA / To Do list

I have taken a Personality Analysis: YES NO

If yes, which personality style do you remember scoring highest in? _____

Experiences

“AND WE KNOW THAT IN ALL THINGS GOD WORKS FOR THE GOOD OF THOSE WHO HAVE BEEN CALLED ACCORDING TO HIS PURPOSE”

Romans 8:28

Please list up to two or three experiences that seem to have had a profound impact on your life. How would you describe the impact they have had? (Attach a page if more space is needed.)



CONFIDENTIAL BACKGROUND SCREENING

NAME HOME PHONE

ADDRESS WORK PHONE

CITY STATE ZIP CELL #

BIRTHDATE / / E-MAIL

OCCUPATION / PLACE OF WORK

DRIVER'S LICENSE# STATE

SPOUSE'S NAME

STATUS: Single Married Remarried Widowed Single again

References It's required to list 3 references: 2 personal references that are **not family members**, 1 work/school reference. These references must have known you for at least a year and have a sincere knowledge of your character. Minors under age 18 may provide references from coaches & teachers. No minors used as references, please.

Personal Reference

Name:		Email:	
Address:		City :	State:
Nature of Relationship:	Phone:	Length of Time Known :	

Personal Reference

Name:		Email:	
Address:		City :	State:
Nature of Relationship:	Phone:	Length of Time Known :	

Work/School Reference

Name:		Email:	
Address:		City :	State:
Nature of Relationship:	Phone:	Length of Time Known :	

Previous Work Experience with Minors

List all church/organization work involving minors during the past five years (Attach additional pages as needed):

Dates	Church/Organization (Name, City, State, Contact Person)	Work Performed



BACKGROUND SCREENING (p.2)

(Answering YES to any of the following questions does not automatically disqualify someone for church service)

***I prefer to discuss the following questions in confidence with one of our Pastors.** YES NO

The following questions are part of a process to help provide a safe and secure environment. All information is confidential.

- Have you ever been accused or convicted of the use or sale of illegal drugs? YES NO
- Have you ever used illegal drugs? YES NO
- Have you ever struggled with alcohol or substance abuse? YES NO
- Are you presently facing charges for any criminal offense? YES NO
- Have you ever been charged with a misdemeanor or felony? YES NO
- Have you ever been accused of or charged with any offense involving children? YES NO
- Are you engaged in any conduct that is contrary to the teachings of the Bible or N.Central? YES NO
- Do you have any health issues that could place another adult or minor at risk? YES NO
- Have you ever been diagnosed with a mental illness? YES NO
- Have you ever been denied legal custody of your child/children in any legal proceedings?
(including divorce decrees or settlements) YES NO
- We conduct a police background check on all adult applicants. Do you have any objections? YES NO
- Have you ever been dismissed from a volunteer position for any reason? YES NO
- Have you ever been issued a restraining order for any reason? YES NO

If you answered "yes" to any of the above questions, please explain briefly. We at N.Central understand the life-changing power of Jesus Christ and are eager to hear how He has helped you. (Feel free to attach any additional pages as needed.)

Criminal Records Check and Authorization

(All applicants must complete this section; only those 18 and older are subject to check.)

I hereby request a criminal background check and the release of any information, which pertains to any record of convictions in its files or in any criminal file maintained on me whether local, state, or national. I hereby release any criminal law enforcement agency from any and all liability resulting from such disclosure. Any person or entity relying on this request may rely on a photocopy or facsimile as if it were an original.

X Signature _____ **Date** _____ **Born** ____/____/____

Social Security Number _____ - _____ - _____ Place of Birth City: _____ State: _____

Legal Name _____
(Please Print) Last First Middle

Print any & all other names you may have used (including maiden name):

Applicant Statement: All Applicants Must Sign

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for working with or around minors. In consideration of this evaluation by North Central, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Bylaws and policies of North Central and to refrain from unscriptural conduct in the performance of my services on behalf of the church. I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and understand.

X Applicant Signature required : _____ **Date** _____

(Required of all applicants less than 18 years of age:)

X Parent or Guardian Signature: _____ **Date** _____

