

VOLUNTEER LEADERSHIP APPLICATION

Date ____/____/____

The Central Conference of the Evangelical Covenant Church (773) 267-3060 www.covchurch.org/central

Miss Ms. Mrs. Mr. Dr. Rev.

Name: _____ Spouse: _____
FIRST MIDDLE LAST

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (____) _____ E-mail: _____

Church Membership: _____ City: _____

Diversity (optional) Gender: Male Female
Language(s): English Spanish Korean _____
Ethnicity: Black Hispanic Korean White _____
Age: 18—35 35—55 55—70 70+

Your faith story: (INCLUDE CONVERSION, BELIEFS, SERVICE, ETC)

Why would you like to serve?

Spiritual Gifts (ROM 12, I COR 12, EPH 4)

- Leadership
- Mercy
- Helps/Service
- Teaching
- Administration
- Discernment
- _____
- Faith
- Healing
- Wisdom
- Evangelism
- Pastoral
- Hospitality

Vocational Area(s)

- Education
- Healthcare
- Communications
- Financial
- Technology
- Ministry
- _____
- Industrial
- Management
- Real Estate
- Social Services
- Legal
- Sales or Retail
- Non-Profits

Leadership Interests

- Executive Board
- HarborPoint Board
- Church Planting
- Education / Leadership
- Prayer & Evangelism
- Church & Society
- Ministerium
- Women's Ministries
- Cultural Ministries
- Ministerial Care
- Human Resources

Leadership Experience (LAST 10 YEARS TO THE PRESENT)

- Church Board Education/Discipleship Care/Deacon Mutual Ministry / PRC
 Worship Evangelism Social Action Stewardship _____
- Conference Board/Commission member, *specify*: _____ date(s) _____
 Volunteer for _____
- Denomination Board member, *specify*: _____ date(s) _____
 Volunteer for _____
- Community Board member, *specify organization(s)*: _____
 Volunteer for _____

Professional Experience (CURRENT AND MOST RELEVANT POSITIONS)

Occupation: _____ Years: _____

JOB TITLE COMPANY

Past occupations: 1 _____

2 _____

Professional Involvement: _____

MEMBERSHIPS, AWARDS, AND RECOGNITIONS

Educational Experience

Education: High school College/Trades, major: _____

Masters of _____ Doctorate, field: _____

Licenses and Certifications: _____

Other training: _____

With my signature, I affirm that all information above is true and accurate. Upon submission and approval, I am willing to serve through conference or denominational ministries for Christ's mission.

Signed: _____

OFFICE USE ONLY

Date received: ____/____/____

Reference check by _____: Membership Leadership Professional/Educational

Recommend for: 1 _____ Date: ____/____/____ E NE A

2 _____ Date: ____/____/____ E NE A

3 _____ Date: ____/____/____ E NE A

Other notes: _____

5 words

to describe an effective member
of this board/commission/committee:

Name of Group: _____