



Whole Life Christian Church
Live Well & Live Blessed

Office Use Only	
_____	Approved
_____	Denied
_____	Initials

Volunteer Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ E-Mail Address: _____

Cellular Phone: () _____ Are you? Single Married Widowed Divorced

Ministry Information

1) Are you are a member of the church? Yes No If yes, since when: Month _____ Year _____

2) Do you regularly attend services? Yes No If yes, since when: Month _____ Year _____

3) Do you regularly attend a Bible Study or have quiet time with the Lord? Yes No

4) In what area (s) of ministry are you currently involved? _____ How Long? _____

5) What area (s) of ministry would you like to volunteer in? _____

6) Have you personally accepted Jesus Christ as your Lord and Savior and are you committed to having the character of Jesus live through you? Yes No

7) Tell us about your spiritual journey to date:

References

Please list three references.

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Should my application be accepted, I agree to refrain from unscriptural conduct in the performance of my services on behalf of the church.

If this application leads to volunteering at WLCC, I understand that false or misleading information in my application may result in my release of serving at WLCC.

Signature: _____ Date: _____