



# Staff Application for Event Staff

Ohio Girls Ministries needs the help of many to be able to minister to the girls and leaders across our state. By sharing your talents and connections, you are putting love for Christ and others to work.

**PLEASE PRINT CLEARLY**

Name	Phone (      )
Address	
City	State/Zip
E-mail	Age (if under 18)
Church Name	Phone (      )
Church City	State/Zip

I recognize that God has blessed my life by giving me gifts with which to serve Him. I am willing to share these gifts at district Girls Ministries activities and events.

**MUSIC**

- Worship Leading/Team
- Solo/Group Vocal
- Instrumental (specify)
- Sound/Computer Tech

**GENERAL**

- Decorating (stage/other)
- Sales Tables (staffing)
- Physical Activities/Exercise
- Camping Expertise

- Skit Writing
- Special Activity Ideas
- Crafts on a Budget
- Photography/Video

**OTHER** (please list)

\_\_\_\_\_       \_\_\_\_\_       \_\_\_\_\_

Check the events that you would be available:

- Girls Retreat
- Powette

If applying for staff, be sure to complete this packet.  
Then have your pastor complete  
the Pastoral Reference Form (on the last page) and mail to:  
**Ohio Girls Ministries, 8405 Pulsar Place, Columbus, OH 43240**

# Application for Children/Youth Work

Church \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

I understand that completing this form in no way obligates me to the Ohio Ministry Network, but merely furnishes useful information to the leadership in selecting volunteer personnel. It is used to help the church provide a safe and secure environment for those who participate in our program. All questions must be answered. If more room is needed for additional information, please attach a separate sheet.

Name \_\_\_\_\_ Date / / \_\_\_\_\_

Address \_\_\_\_\_ City / Zip \_\_\_\_\_

Phone (        ) \_\_\_\_\_ Occupation \_\_\_\_\_

Date of Birth / / \_\_\_\_\_ Marital Status \_\_\_\_\_

Sex  Male  Female

What type of children/youth work do you prefer?  
\_\_\_\_\_  
\_\_\_\_\_

## CHURCH ACTIVITY

Date Saved / / \_\_\_\_\_ Date Baptized / / \_\_\_\_\_ Date Holy Spirit / / \_\_\_\_\_

List the church name and pastor of any other church in which you have been actively involved in the past five years.

Church \_\_\_\_\_ Pastor \_\_\_\_\_ Phone \_\_\_\_\_

Church \_\_\_\_\_ Pastor \_\_\_\_\_ Phone \_\_\_\_\_

Are you in complete agreement with the statement of faith of the Assemblies of God?

Yes  No

List any gifts, callings, training, education or other factors that have prepared you for children/youth work.  
\_\_\_\_\_  
\_\_\_\_\_

## PERSONAL INFORMATION

Have you ever been charged or convicted of child abuse or crime involving actual or attempted sexual molestation of a minor?

Yes

No

If yes, please explain:

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Have you ever been terminated/relieved of any responsibilities within the scope of children's ministries?

Yes

No

If yes, please be specific and list information regarding the position, reason for termination and date.

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Have you any physical handicaps or conditions preventing you from performing certain types of activities relating to children/youth work?

Yes

No

If yes, please explain:

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Do you have a current valid driver's license?

Yes

No

If yes, write down your Driver's License # :

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List any driving violations in the past three (3) years:

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*If you have experienced physical or sexual abuse in the past and have not fully resolved this issue, we encourage you to counsel with your pastor before accepting this position.*

## PERSONAL REFERENCES

Name	Name
Address	Address
Phone	Phone

## APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any reference or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children/youth work. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf.

I recognize that it is a privilege to minister at **Ohio Girls Ministries events**. I agree to be bound by the Bylaws and policies of the church and to refrain from any unscriptural conduct in the performance of my services on behalf of the church.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date



# Pastoral Reference Form

Applicant, please print your name on this form and check the event(s) in which you plan to be involved. Then, give this form to your pastor to complete and mail to:

**Ohio Girls Ministries**  
8405 Pulsar Place, Columbus, OH 43240  
E-mail us at: [ogm@ohioministry.net](mailto:ogm@ohioministry.net)

Applicant's Name \_\_\_\_\_

Check the events in which you desire to be a part:

- Girls Retreat
- Powette

The above named individual has indicated interest in being a part of the Ohio Girls Ministries Staff during our summer events. We are very excited about this, as we are searching for qualified leaders to help minister to and love our girls at Heartland Conference Retreat Center.

Would you take a few moments and complete the following information regarding this applicant? It would help us greatly.

How long have you known the applicant? \_\_\_\_\_

How is the applicant involved in ministry in the local church? \_\_\_\_\_

Does the applicant possess a cooperative attitude toward you and other leaders in your church? \_\_\_\_\_

Would you recommend the applicant to our network as a possible staff member? \_\_\_\_\_

Please feel free to offer additional insights on a separate sheet of paper. We appreciate your hard work in the ministry, and thank you for your help in this matter.

\_\_\_\_\_  
Pastor's Signature

\_\_\_\_\_  
Church Name

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date