

## CHURCH ACTIVITY

Are you a Christian? \_\_\_\_\_ When did you accept Jesus Christ as your personal Savior? \_\_\_\_\_ Have you been immersed? \_\_\_\_\_ If so, when? \_\_\_\_\_ Where? \_\_\_\_\_

What is the name of the church that you are a member of?

\_\_\_\_\_

List other churches you have attended regularly during the past 5 years. (Give name and complete mailing address) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List all previous church work involving children, youth or developmentally disabled persons. (Please identify church and type of work) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List all gifts, callings, training, education, or other factors that have prepared you for work with children, youth or developmentally disabled persons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---