



[Please Attach  
Photo Here]

# SERVANT STAFF APPLICATION

## REQUESTED AREA OF MINISTRY

1. \_\_\_\_\_ | 2. \_\_\_\_\_ | 3. \_\_\_\_\_ | 4. \_\_\_\_\_

### CONFIDENTIAL INFORMATION

Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Mr.  Mrs.  Ms.

Name \_\_\_\_\_

Address \_\_\_\_\_

Daytime Telephone (\_\_\_\_) \_\_\_\_\_

Evening Telephone (\_\_\_\_) \_\_\_\_\_

Mobile Telephone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Marital Status: Single  Married  Divorced

State of Marital Relationship: Excellent  Good  Fair  Poor

Spouse's Name \_\_\_\_\_

Current Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Work Address \_\_\_\_\_

Work Telephone (\_\_\_\_) \_\_\_\_\_

### EMERGENCY INFORMATION

In case of an emergency, please contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

### SPIRITUAL INFORMATION

Date of your born again experience? \_\_\_\_\_

Have you experienced the baptism of the Holy Spirit? \_\_\_\_\_

How long have you been a member? \_\_\_\_\_

Do you agree with our statement of faith and vision? \_\_\_\_\_

Do you tithe? \_\_\_\_\_

**PERSONAL  
INFORMATION**

Do you have any habits that you are struggling? Yes  No

If yes, explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STATEMENT**

All the information that I have stated on this application is true. I give TRUTH CENTER the right to verify all information given.

Signed by: \_\_\_\_\_

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

**FOR OFFICE USE ONLY**

Date Application Received \_\_\_\_\_

Approved  On-hold  Denied

Date of Servant Online Training Class: \_\_\_\_\_ Date Completed : \_\_\_\_\_

**Spiritual Gifts Survey** \_\_\_\_\_

Volunteer placement meeting scheduled for: \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

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