

Leadership Application

Please fill out completely and print clearly.

PART ONE - Leader Information

Name: _____ Date: _____

Address: _____

Home Phone: _____ Work Phone: _____ Ext: _____

Email: _____

PART TWO - Vital Information

Birth Date: _____ Male Female

How long have you lived in Ontario? _____ Years Other Provinces? _____ Years

Are you able, without reservations, to perform the essential duties described for the volunteer position of a LifeGroup leader? _____

Marital Status: Single Engaged Married Divorced/Separated
 Common-Law

Spouse's Name: _____ Spouse's Birth Date: _____

Wedding Anniversary Date: _____ Number of Years Married: _____

Children: Name: _____ Age: _____ Birth Date: _____
 Name: _____ Age: _____ Birth Date: _____
 Name: _____ Age: _____ Birth Date: _____
 Name: _____ Age: _____ Birth Date: _____

Formal Education

Highest level of education completed: Some High School (Grade____)
 High School Some College/University College/University Degree

Presently a student: Yes No

Employment History

Position Held	Employer	Years Employed
_____	_____	_____
_____	_____	_____
_____	_____	_____

Church History and What You Believe

How long have you regularly attended Jubilee Faith Centre? _____ Years

Do you tithe? Yes No

Information on Former Church Attended

Name of former church attended: _____

City/Province: _____

How long attended: _____ Pastor: _____

Are you a born-again Christian? Yes No How long? _____

When did you receive the baptism in the Holy Spirit? _____

Please check the statements that apply to you. I believe...

- in the virgin birth and deity of Jesus Christ
- that Jesus is God's Son and the only sacrifice for sin
- that Jesus rose bodily from the dead
- that I must be born again to receive eternal life
- in the infallibility of the Holy Bible
- in eternal damnation for the lost

Ministry Related Experience

(List any ministry or LifeGroup experience)

Position Held	Ministry	Time Involved
_____	_____	_____
_____	_____	_____
_____	_____	_____

Background Information

Have you ever been charged, arrested or convicted of a felony or misdemeanor?

Yes No

If yes, what:

Certain lifestyle choices or actions can affect the people that you minister to. Consider your readiness for leading a LifeGroup by examining your own life. Here are some examples of things that hinder or disqualify you from being approved as a LifeGroup leader: smoking, use of illegal drugs, alcohol abuse, abusing others (physically, emotionally or sexually), and living common-law.

- I would like to meet privately to discuss my readiness to lead.
- I am confident before God that I am ready to lead a Small Group.

About Yourself

Special Interests and Talents:

- | | | |
|---|---|---|
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Assistant to Leader | <input type="checkbox"/> Visitor Follow Up |
| <input type="checkbox"/> Crafts/Sewing/Painting | <input type="checkbox"/> Creative Writing | <input type="checkbox"/> New Believer Follow Up |
| <input type="checkbox"/> Praise and Worship | <input type="checkbox"/> Outreach | <input type="checkbox"/> Clerical Skills |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Greeter | <input type="checkbox"/> Providing Refreshments |
| <input type="checkbox"/> Sound & Media | <input type="checkbox"/> Drama/Dance | <input type="checkbox"/> Recruiting Volunteers |
| <input type="checkbox"/> Storytelling | <input type="checkbox"/> Musical Instruments | <input type="checkbox"/> Organizing Volunteers |
| <input type="checkbox"/> Intercessory Prayer | <input type="checkbox"/> Newsletter/Publisher | <input type="checkbox"/> Games and Recreation |

List three strengths

List three weaknesses

Where is your passion for ministry?

- | | | | |
|---------------------------------|---|------------------------------------|--|
| <input type="checkbox"/> Adults | <input type="checkbox"/> Bible Teaching | <input type="checkbox"/> Children | <input type="checkbox"/> Prayer |
| <input type="checkbox"/> Men | <input type="checkbox"/> Special Needs | <input type="checkbox"/> Families | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Women | <input type="checkbox"/> Helps | <input type="checkbox"/> Parenting | <input type="checkbox"/> Recreation & Activities |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Praise & Worship | <input type="checkbox"/> Singles | <input type="checkbox"/> Other: |

Explain briefly why you want to be a LifeGroup leader:

References

Please provide the name of two personal (non-family) references and one pastoral or ministry supervisor reference.

	Name/Relationship	Mailing Address	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

By signing below, I certify that the information contained in this application is complete, accurate, and not misleading in any way. I authorize Jubilee Faith Centre to contact references provided, as well as any sources not provided to obtain information regarding my character and fitness for LifeGroup leadership. Should my application be accepted, I agree to submit to the policy and procedures of JFC LifeGroup Ministries and to refrain from unscriptural conduct in the performance of my services on behalf of Jubilee Faith Centre.

Applicant's Signature: _____ Date: _____

Leadership Commitment

"Deacons likewise, are to be men worthy of respect, sincere, not indulging in much wine, and not pursuing dishonest gain. They must keep hold of the deep truths of the faith with a clear conscience... They must first be tested; and then if there is nothing against them, let them serve as deacons." 1 Timothy 3:8-10

Qualifications:

1. Sincere, worthy of respect, and of a good reputation
2. Tithe into God's work at Jubilee Faith Centre
3. Have a genuine desire to serve and minister to other people
4. Able to lead, motivate, and teach other people
5. Able to create positive group dynamics and deal with conflicts within the group

I believe that I meet the requirements for serving as a LifeGroup leader, and I have read and agree to the following (please initial):

- ____ To fulfill the responsibilities outlined on the job description.
- ____ To abide by the JFC LifeGroup leader honour code.
- ____ To help fulfill the vision and mission of the church.
- ____ To embrace and teach Christian principles as stated in Jubilee Faith Centre's Statement of Faith.

Applicant's Signature: _____ Date: _____

PART THREE - LifeGroup Ministry Directory Form

Name: _____ Email: _____

Have you been to a JFC LifeGroup Leader Orientation? Yes No

Have you led a JFC LifeGroup before? Yes No

Group Information

Session Fall Winter Spring

Name of Group: _____

Clear and concise description of Group: *(please note that LifeGroups information is advertised to the community and complete information is required)*

Who is the group for? _____

What do they need to bring? _____

Meeting location: _____

Date & time: _____

Cost: _____

If meeting at the church, do you require equipment or technology? Please list:

Will you provide child care? Yes No

If yes, please list requirements (i.e.: age group, cost per child (if any), etc.):

Please check only 1 or 2 topics your LifeGroup should be listed under:

- | | | |
|--|---|---|
| <input type="checkbox"/> Arts and Crafts | <input type="checkbox"/> Bible | <input type="checkbox"/> Book Study |
| <input type="checkbox"/> Children | <input type="checkbox"/> College & Careers | <input type="checkbox"/> Cooking |
| <input type="checkbox"/> Couples | <input type="checkbox"/> Drama | <input type="checkbox"/> Family & Parenting |
| <input type="checkbox"/> Fellowship | <input type="checkbox"/> Finances | <input type="checkbox"/> Fine Arts |
| <input type="checkbox"/> Health & Fitness | <input type="checkbox"/> Helps | <input type="checkbox"/> In Workplace |
| <input type="checkbox"/> Men | <input type="checkbox"/> Mentoring | <input type="checkbox"/> Missions |
| <input type="checkbox"/> Music | <input type="checkbox"/> Musical Production | <input type="checkbox"/> Outreach |
| <input type="checkbox"/> Personal Ministry | <input type="checkbox"/> Prayer | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Singles | <input type="checkbox"/> Special Needs |
| <input type="checkbox"/> Technology | <input type="checkbox"/> Topical | <input type="checkbox"/> Video Series |
| <input type="checkbox"/> Women | <input type="checkbox"/> Youth | |