

MINISTRY APPLICATION Part

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Date: Name: E-Mail Address: What ministry are you applying for? Address: _____ City _____ ZIP _____ Work or message phone: Home Phone: I. How long have you been a Christian? 2. How long have you attended church at Calvary Chapel? 3. Have you ever been a member of another church? If yes, where and when? 4. What does the term, "Born again" mean to you? 5. Briefly describe your conversion experience: 6. Do you agree with our Statement of Faith? ☐ Yes □ No 7. Do you agree with Calvary Chapel Distinctives? ☐ Yes □ No 8. List the six teachers, preachers and/or evangelists that have been the greatest influence in your Christian life, including print, T.V., radio and in person: 9. Are you involved in any other ministries at Calvary or elsewhere? If yes, where and describe your function: 10. What spiritual gifts do you believe the Lord has given you? II. Is there anything in your life that would hinder your witness for Christ in any way, such as besetting sins, sexual activity outside marriage, fleshly habits, or casual usage of drugs, alcohol, tobacco, etc.? ☐ Yes ☐ No

If you have questions, call the pastor at 256-6688. Please drop your completed application in the agape box or hand it to the pastor.

MINISTRY APPLICATION Part B

regarding each. Use a separate sheet of paper if necessary.
I.The Trinity
2. Inerrancy of Scripture
3. The Rapture of the Church (include when you believe this will take place)
4. Calvinism vs. Arminianism
5. Salvation by Grace
6.Water Baptism
7. Baptism of the Holy Spirit
8. Gifts of the Spirit
9.The Virgin Birth
I0. Atonement on the Cross
II. Sinful Nature of Man
I2.The Resurrection of Christ

Describe the following terms and doctrines to the best of your ability; also include your personal beliefs