



Youth Helper Application

(for students in 6th-12th grade only)

A Youth Helper is a student between 6th-12th grade who has been approved by Grace Fellowship staff to assist in Children's Ministry.

Application Process

1. You will receive the application, our Statement of Faith, and the Child Protection Policy.
2. Return the completed application in a sealed envelope to the church office.
3. A Pastor will evaluate your application and contact an appropriate ministry leader for your age group as a reference. He might also contact you and/or your parents to discuss your application.
4. You will be informed when your application has been approved

Qualifications

The basic qualifications for Youth Helpers include:

- You a Christian and are growing in your faith.
- Your parents approve and are willing to accommodate your ministry schedule.
- You actively attend Grace Fellowship.
- You agree with and support the Statement of Faith of Grace Fellowship.
- You complete the application and any training process.

Youth Helper Information Form

Individual Information

Student's Full Name _____

Street Address _____

City _____ State _____ ZIP Code _____

Date of Birth _____ E-mail address _____

Home Phone # _____ Cell Phone _____

Current Grade Level in School _____ Name of School _____

Name of Your Parent(s) or Guardian(s) _____

Parent's E-mail address _____

Church Information

Are you a regular attender of Grace Fellowship? Yes No

How long have you attended Grace Fellowship? _____

Do you have faith in Jesus Christ as your Savior for the forgiveness of your sins? Yes No

Briefly share how you became a Christian (testimony) _____

Why do you want to work with children? _____

Please tell us about any experience you have working with children _____

Agreement

The information contained in this application is correct to the best of my knowledge. I have talked openly and honestly with my parents and/or ministry leader about any experiences I may have had in the past that could negatively affect my work with young children.

I agree to:

- Set a positive example of good citizenship for the children I hope to serve by honoring the precepts of God's Word and the laws of the the United States by the power of the Holy Spirit.
- Keep my body physically free from alcohol and drugs not prescribed by a medical doctor.
- Keep my eyes, mind, and body free from images or writings that would violate the principles of purity and holiness taught in God's Word.
- Follow the teaching and activity instructions of the adult leaders who coordinate my area of service.
- Serve when I am scheduled or arrange an approved substitute when I must be absent. I will inform my adult leader of this change.
- Attend training as requested.
- Regularly participate in the life, worship, and ministries of Grace Fellowship.
- Live a life of prayer and the study of God's Word.

I have read the church policies related to Children's Ministry and agree to abide by them.

Print Name

Signature

Date

Approval

Parent Approval:

I affirm that my child, named above, has accepted Jesus Christ as Savior and Lord and give him/her permission to participate in the Children's Ministry of Grace Fellowship.

Print Name

Signature

Date

Pastoral Approval:

The applicant named above has been approved for ministry.

Signature

Date

Name

Position