

River of Life Youth Worker Personnel Information Form

Personal Data

(please print)

Date: _____

Full Legal Name: _____

If you have ever used other names, please provide complete names and date in use:

Name: _____ Date used: From _____ To _____

Name: _____ Date used: From _____ To _____

Name: _____ Date used: From _____ To _____

Social Security Number: _____ - _____ - _____ Marital Status: _____

Home Phone: (____) _____ Date of Birth: _____

Present Address: _____
(street address) (city) (zip code)

Spiritual Data

Have you accepted Jesus Christ as your personal Savior? Yes _____ No _____

In a brief paragraph, please outline your spiritual testimony including when (if) you received Christ as Savior: _____

Ministry Data

Please list the churches you have attended and the ministries (e.g., children's church, Jr. High youth worker, etc.) in which you have participated within the last five years.

Church Name: _____

Address: _____
(street address) (city) (zip code)

Ministry: _____

Church Name: _____

Address: _____
(street address) (city) (zip code)

Ministry: _____

Personal References

Please list at least two personal references. Please do not list relatives and list at least one person that is not affiliated with River of Life.

Name: _____

Address: _____
(street address) (city) (zip code)

Phone: () _____ Relationship: _____

Name: _____

Address: _____
(street address) (city) (zip code)

Phone: () _____ Relationship: _____

I hereby authorize River of Life to make inquiries concerning my background in connection with evaluating the information I have provided on this form, including conducting a check for any criminal records. I hereby authorize all persons associated with me, including churches, employers, law enforcement agencies, licensing and social service agencies to release any information contained in their files or records concerning me to River of Life and its representatives.

Applicant's Signature: _____ Date: _____

Applicant's Name _____
(please print)