



# INSTRUCTIONS

- 1) Please **PRINT ALL** information **CLEARLY**
- 2) Please complete **both sides** of this application
- 3) Sign and date this application

# OWCM SERVANT/LEADER APPLICATION

LAST NAME		FIRST NAME			M.I.
STREET ADDRESS			CITY	STATE	ZIP
HOME PHONE		WORK PHONE		CELL/OTHER PHONE	
EMAIL ADDRESS			I WOULD YOU LIKE TO RECEIVE PERIODIC MESSAGES FROM THE MINISTRY: (CHECK ALL THAT APPLY) TEXT <input type="checkbox"/> EMAIL <input type="checkbox"/> NONE <input type="checkbox"/>		
<b>APPLICATION STATUS</b>  <b>NEW APPLICANT</b> <input type="checkbox"/> <b>ANNUAL UPDATE</b> <input type="checkbox"/>	<b>GENDER</b>  <input type="checkbox"/>  <input type="checkbox"/>		<b>SOCIAL STATUS</b> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/>		
	<b>AGE RANGE</b> <input type="checkbox"/> <input type="checkbox"/>		18-21 <input type="checkbox"/> 22-25 <input type="checkbox"/> 26-30 <input type="checkbox"/> 31-35 <input type="checkbox"/> 36-45 <input type="checkbox"/> 46-55 <input type="checkbox"/> 56-65 <input type="checkbox"/> OVER 65 <input type="checkbox"/>		

**EMPLOYMENT STATUS**

ENTREPRENEUR (list type of business)     EMPLOYED (list current occupation)     UNEMPLOYED     STUDENT     RETIRED

Please list the department(s) in which you currently serve, or for which you are applying: (Three choices maximum)

1.	2.	3.
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Please respond to the following questions by checking the appropriate boxes and providing all dates:

	YES (OWCM)	YES (Other church)	NO	DATES
Born Again?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Water baptized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Spirit-filled (with evidence of speaking in other tongues)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Successfully completed New Members Class?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Consistent Tither? (last six months)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Please answer the following questions by checking the appropriate boxes along with a brief explanation.

- Are you living in any way that does not exemplify a life of holiness and purity, or could potentially bring shame or embarrassment to yourself or the ministry? Yes  No  \_\_\_\_\_
- Are you an active member or have you made any pledges or oaths to any organizations, groups, or persons, such as Masons, Eastern Stars, astrology, fraternities/sororities, witchcraft or Satan worship, which would be inconsistent with the Bible and your commitment to Christ? Yes  No  \_\_\_\_\_
- Are you presently leading an organized prayer group or Bible study at your home or any other place outside of OWCM? Yes  No  \_\_\_\_\_
- How long have you been a member of OWCM? \_\_\_\_\_

**IMPORTANT: Please complete the following section and then sign your name and the date at bottom of page.**

<p><b>PRODUCTIVITY STYLE:</b> Check <b>ONE</b> box from each of the statements below that you believe best describes you.</p> <ul style="list-style-type: none"> <li>• I am more productive in a setting that is:                             <ul style="list-style-type: none"> <li><input type="checkbox"/> Structured</li> <li><input type="checkbox"/> Unstructured</li> </ul> </li> <li>• I am more productive when working with:                             <ul style="list-style-type: none"> <li><input type="checkbox"/> People</li> <li><input type="checkbox"/> Tasks</li> </ul> </li> </ul>	<p><b>YOUR GIFTS:</b> On a scale of 1 to 5, rate your top 5 gifts (from your Gifts Assessment).</p> <ul style="list-style-type: none"> <li>• Administration_____</li> <li>• Apostleship_____</li> <li>• Craftsmanship_____</li> <li>• Discernment_____</li>   <li>• Evangelist_____</li> <li>• Exhortation_____</li> <li>• Faith_____</li> <li>• Giving_____</li>   <li>• Healing_____</li> <li>• Helps_____</li> <li>• Hospitality_____</li> <li>• Intercession_____</li>   <li>• Knowledge_____</li> <li>• Leadership_____</li> <li>• Mercy_____</li> <li>• Miracles_____</li>   <li>• Missionary_____</li> <li>• Music_____</li> <li>• Pastor/Shepherd_____</li> <li>• Prophecy_____</li>   <li>• Service_____</li> <li>• Teaching_____</li> <li>• Tongues_____ (and Interpretation)</li> <li>• Wisdom_____</li> </ul>	<p><b>PROFESSIONAL SKILLS:</b> Circle EACH skill that applies to you.</p> <ul style="list-style-type: none"> <li>• Accounting</li> <li>• Advertising/Marketing</li> <li>• Carpentry</li> <li>• Construction Management</li> <li>• Customer Service</li> <li>• Drywall Installation</li> <li>• Education</li> <li>• Electrical</li> <li>• Entrepreneurship</li> <li>• Event Coordination</li> <li>• Facility Maintenance</li> <li>• Floor &amp; Carpet Care</li> <li>• Food Service</li> <li>• Foreign Language Translation</li> <li>• Government</li> <li>• Graphic Design</li> <li>• HVAC</li> <li>• Health Care/Medical</li> <li>• Information Technology</li> <li>• International Trade</li> <li>• Law Enforcement</li> <li>• Legal</li> <li>• Manufacturing</li> <li>• Mechanical Engineering</li> <li>• Military</li> <li>• Multimedia</li> <li>• Office Administration</li> <li>• Painting</li> <li>• Pipe Fitting</li> <li>• Plumbing</li> <li>• Project Management</li> <li>• Retail/Wholesale Trade</li> <li>• Sales</li> <li>• Secretarial</li> <li>• Software Training</li> <li>• Transportation</li> <li>• Warehousing</li> <li>• Writing</li> <li>• _____</li> </ul>	<p><b>PERSONAL INTERESTS:</b> Circle EACH interest that applies to you.</p> <ul style="list-style-type: none"> <li>• Acting</li> <li>• Children</li> <li>• Comfort</li> <li>• Community Relations</li> <li>• Computer Technologies</li> <li>• Customer Service</li> <li>• Dancing</li> <li>• Education</li> <li>• Evangelism</li> <li>• Exercise/Fitness</li> <li>• Health/Nutrition</li> <li>• Hospitality</li> <li>• Housekeeping</li> <li>• Marketing</li> <li>• Marriage</li> <li>• Missions</li> <li>• Music: Instrument/Singing</li> <li>• Office Administration</li> <li>• Prayer/Intercession</li> <li>• Recreation/Sports</li> <li>• Sales</li> <li>• Security</li> <li>• Sewing</li> <li>• Traffic Control</li> <li>• Translation</li> <li>• Ushering</li> <li>• Video Technologies</li> <li>• Weddings</li> <li>• Writing</li> <li>• Youth</li> <li>• _____</li> <li>• _____</li> <li>• _____</li> </ul> <p>Please use blank lines to write in anything that isn't on these lists.</p>
<p><b>YOUR AVAILABILITY:</b></p>			
<p>SUNDAY</p>			
<p>MONDAY</p>			
<p>TUESDAY</p>			
<p>WEDNESDAY</p>			
<p>THURSDAY</p>			
<p>FRIDAY</p>			
<p>SATURDAY</p>			

**Your Passion:** Please tell us what it is that you would be doing if money wasn't an issue and the sky was the limit.  
***I am most passionate about*** \_\_\_\_\_

Office Use Only

We assure you that the information you provide on this form will be released with discretion and on an as needed basis.

Signature

Date