



APPLICATION

Name _____ Cell Phone _____

Address _____

Email _____ Facebook Name _____

Briefly describe you devotional discipline ? _____

Any Experience/Classes/Theological Training that we should be aware of that would benefit this ministry? _____

Home Church _____

Please have your lead Pastor's Signature _____ blessing for this ministry.

What days/evenings of the week are you available _____

Are you willing to work in a non-denominational setting. Y / N

Are you willing to commit to consistent scheduling Y/N

Are you willing to attend periodic classes held by this ministry Y/N

I _____ am willing to submit to a background check for security to attend
(please print)

an orientation class on security and policies to subscribe to a strict policy of confidentiality and to abide by all the standard policies and procedures of the Broome County Public Safety Facility.

Signature

Date