



LEADERSHIP IN MINISTRY APPLICATION. _____ '16-'17

GENERAL INFORMATION:

Legal Name: _____ Nickname _____

Home Address: _____

City: _____ Zip: _____

Cell Phone: (_____) _____ Home phone: (_____) _____

Email: _____

Years @ Loma Linda Academy: _____ Also Attended? _____

Cumulative High School GPA: _____

SPIRITUAL SELF-ASSESSMENT: I feel my relationship with God is:

_____ Very strong _____ Growing

_____ Slow progress _____ At a low point

PRIOR LEADERSHIP EXPERIENCE:

Offices held while in High School/Academy:

Other Experiences in Leadership:

HAVE YOU EVER BEEN INVOLVED IN OR LEAD OUT IN A SMALL GROUP?

_____ yes _____ no If yes, when & what kind of group _____

HAVE YOU EVER BEEN INVOLVED IN OR LEAD OUT IN SCHOOL OR CHURCH MINISTRY?

_____ yes _____ no If yes, where & what did you do _____

CAMPUS MINISTRIES LEADERSHIP:

FOR WHICH POSITION (MINISTRY DIRECTOR) DO YOU WISH TO APPLY: *(Please check all that apply and if checking more than one, please rate them in order of your preference by using an 1.2.3.4. etc... next to the checkbox.*

- | | |
|--|--|
| <input type="checkbox"/> Student Chaplain | <input type="checkbox"/> Morning Devotions Director |
| <input type="checkbox"/> Worship Director | <input type="checkbox"/> Morning Devotions Producer |
| <input type="checkbox"/> Worship Producer | <input type="checkbox"/> Bible Study Director |
| <input type="checkbox"/> Midweek Praise Director | <input type="checkbox"/> Bible Study Producer |
| <input type="checkbox"/> CM LIVE Director | <input type="checkbox"/> S.M.I.L.E. Director |
| <input type="checkbox"/> Family Groups Director | <input type="checkbox"/> S.M.I.L.E. Producer |
| <input type="checkbox"/> Family Group Producer | <input type="checkbox"/> Campus Ministries Center Director |
| <input type="checkbox"/> Prayer Warrior Director | <input type="checkbox"/> Campus Ministries Center Producer |
| <input type="checkbox"/> Prayer Warrior Producer | <input type="checkbox"/> Elementary Ministries Director |
| <input type="checkbox"/> Outreach Director | <input type="checkbox"/> Elementary Ministries Producer |
| <input type="checkbox"/> Outreach Producer | <input type="checkbox"/> Jr High Ministries Director |
| <input type="checkbox"/> Web Director | <input type="checkbox"/> Jr High Ministries Producer |
| <input type="checkbox"/> Graphic Designer | |
| <input type="checkbox"/> Public Relations Director | |
| <input type="checkbox"/> Reality Check Director | |
| <input type="checkbox"/> Reality Check Producer | |
| <input type="checkbox"/> Media Ministries Director | |
| <input type="checkbox"/> Visual Arts Director | |

STATE BRIEFLY WHY YOU WISH TO SERVE AS INDICATED:

PLEASE LIST SOME OF YOUR GOALS OR DREAMS FOR THE POSITION YOU ARE MOST INTERESTED. (i.e. what would you like to see happen in this area next year)

HOW BUSY DO YOU ANTICIPATE BEING NEXT YEAR? (i.e. class load, sports, class office, student association, other work, club and organizational involvement, etc...)

WHAT SUCCESSES HAVE YOU EXPERIENCED IN YOUR LIFE? WHAT DID YOU LEARN FROM THIS?

LIST A FAILURE YOU EXPERIENCED IN LIFE? WHAT DID YOU LEARN FROM THIS?

WHAT TYPES OF THINGS WOULD YOU DO FOR WORK EVEN IF YOU WEREN'T PAID TO DO THEM? (i.e. dream job)

PLEASE LIST A FEW OF YOUR HOBBIES:

WHAT STRENGTHS QUALIFY YOU FOR THE DESIRED POSITION (S)?

PLEASE LIST WORK AND/OR VOLUNTEER EXPERIENCES (*church, academy/high school, etc... May include programming opportunities, leadership roles, etc...*)

PLEASE LIST PERSONAL AND WORK REFERENCES?

(*Names, titles, organizations, phone numbers. **Minimum of three references required.***)

1. _____
Name Title Organization Phone Number

2. _____
Name Title Organization Phone Number

3. _____
Name Title Organization Phone Number

4. _____
Name Title Organization Phone Number

5. _____
Name Title Organization Phone Number

**PLEASE RETURN TO:
Campus Ministries Office By 2.19.16**