



Youth Ministry Leadership Team Application

Adults (age 18 and over)

Personal Information: Please Print Legibly

First Name: _____ Last Name: _____ Date of Birth: _____

E-Mail: _____ Home Phone: _____ Cell Phone: _____

Home Address: _____ City: _____ Zip Code: _____

T Shirt Size: S M L XL XXL XXXL

Marital Status: Single Married

Work Status: Part-Time Full-Time Student Retired Other

Education: High School Graduate _____ Year Graduated College Graduate _____ Year Graduated

Current Occupation: _____

Why do you want to be a part of the Youth Leadership Team? _____

Please describe one of your strengths and one of your weaknesses: _____

Youth Ministry Skills

Please Check all of the following Skills which you believe are gifts that you possess:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Praying With Youth | <input type="checkbox"/> Event/Planning/Organization | <input type="checkbox"/> Relating to Teenagers | <input type="checkbox"/> Social Justice/Service Projects |
| <input type="checkbox"/> Leading Discussions | <input type="checkbox"/> Retreats/Special Events | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Developing Leadership Skills |
| <input type="checkbox"/> Teaching the Faith | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Photography | <input type="checkbox"/> Leading Small Group Discussions |
| <input type="checkbox"/> Singing | <input type="checkbox"/> Acting in Skits/Dramas | <input type="checkbox"/> Musical Instrument (Please List): _____ | |

Safe Environment

Have you completed the Diocese of Orange Safe Environment Training? Yes No

If not, you will need to complete this training program before you begin serving in youth ministry.

Have you been fingerprinted with the Diocese of Orange? Yes No

If not, you will need to complete this before you begin serving in youth ministry.