

SHBC Student Life Ministry

APPLICATION

Basic Information

Name: _____

Address: _____

Phone(s): _____ Email: _____

Parent/ Guardian's Name(s): _____

Grade on 9/1 this year: _____ School: _____

Gender: Male Female

Application For

Student Advisory Leadership Team (SALT)

Student Praise and Worship Team

Other: _____

Just for Kicks

Favorite Thing to do for fun: _____

Favorite type of music: _____

Favorite Entertainer(s): _____

Favorite Movie: _____

Your Relationship with God

Note: while there are no right or wrong answers here, the style and completeness of your answer is a factor in your application.

1. Please share when and how you became a Christian:

2. Please share what you are doing to continue to grow in your faith in Christ:

3. What is your greatest struggle as a Christian?

4. How would your "un-churched" friends describe your relationship with God?

5. How would your "churched" friends describe your relationship with God?

6. How would your family describe your relationship with God?

7. Why are you applying for this position / team?
