

Church Volunteer & Staff Profile

It is very important to have information about your congregation and staff. Armed with the right knowledge, you can manage, motivate, and negotiate beyond any other church in your community. Knowing your members and staff means knowing how they think and how to involve them in a positive way. Recognition, respect, friendship, service, and help: These are things many of us really care about. Many church members, including staff, are often overlooked for the sake of “the ministry”. All members are a very important ingredient to the success or failure of a ministry.

Use this questionnaire to help develop a profile on your congregation. Some of your information may be useful for finding volunteers, department heads, special events coordinators, or even finding topics for opening conversations—all of which may make your ministry more effective and satisfying, not only for you but your church membership as well. You have permission to use this form as much as you wish.

All information will be held as confidential

Date: _____

Church Member:

1. Name: _____

2. Nickname: _____

3. Address: _____

4. Phone: (_____)_____ Business Phone: (_____)_____

5. Birth Date: _____ Place of Birth: _____

6. Hometown: _____

7. Height(Approx): _____ Weight(Approx): _____

Education:

8. High School: _____

Year Graduated: _____

9. College: _____

College Honors/Degrees: _____

Year Graduated: _____

10. College fraternity/sorority: _____

Sports/Extracurricular Activities: _____

11. If member did not attend college, is he/she sensitive about it? _____

12. Military Service: _____

Discharge Rank: _____

Attitude toward being in the Service: _____

Family

13. Spouse's name and occupation: _____

14. Spouse's Education: _____

15. Spouse's Interests: _____

16. Anniversary: _____

17. Children, if any, names & ages:

18. Children's Education:

19. Children's Interests or Hobbies:

Business Background

20. Current Employment or Past (only if applying for a paid position of the church):

21. Location: _____

22. Title/Duties: _____

23. Previous Positions at company: _____

24. Dates of Employment: _____

25. Previous Employer: _____

26. Title/Duties: _____

27. Dates of Employment: _____

28. Leader/Follower work: _____

29. Professional/Trade: _____

30. Offices held or honors: _____

31. What type of relationship do you have with others? _____

32. Do you believe in a team-concept? _____

33. Who do you believe is a team leader in the church?

34. What strengths (talents/abilities) can you offer the church?

35. If you had an opportunity to change something in the church, what could you offer?

36. What do you believe the greatest need(s) of people in our community:

Special Interests

37. Clubs or Associations: _____

38. Politically Active? _____

39. Active in Community? _____

40. Strong Beliefs (outside the church): _____

41. Confidential/Sensitive Information (Divorce, felonies, etc.):

42. Religious Background: _____

43. Why are you in this church/denomination? _____

Lifestyle

44. Medical History(physical problems/disabilities): _____

45. Do you smoke/drink? _____

46. Do you believe that others are offended by our use? _____

47. Would you like a program to help you quit? _____

48. Favorite Places for Lunch: _____

49. Favorite items on Menu: _____

50. Offended if someone else bought your meal? _____

51. Hobbies and Recreational Interests:

52. Vacation Habits: _____

53. Favorite Vacation Spots: _____

54. Spectator Sports: _____

55. Conversational Interests: _____

56. Whom do you wish to impress the most? _____

57. What do you want others to see or think of you? _____

58. What Objectives/Goals do you want to accomplish in life? _____

59. How can the church help you achieve these? _____

60. What are you most proud of having achieved? _____

61. Do you have any immediate needs? _____

Other Considerations:

62. Do you have any moral or ethical problems? _____

63. Do you feel any obligations to anyone? _____

64. Are you concerned about the opinions of others? _____

65. Do you feel you are self-centered? _____

66. Did you have any problems at previous churches? _____

67. If so, what were they? _____

69. How many churches have you attended in last 5 years? _____

70. Were you ever in church leadership? _____

71. What positions? _____

72. How do you handle conflict? _____

73. Do you believe in the fundamentals of our church? _____

74. Do you believe in paying tithes? _____

75. If someone tells you an untruth about the pastor or another church member, would you report it to the pastor or other leadership? If not, why?

76. How can you support your pastor, leadership, and church more effectively?

Additional Comments:

Experience & References

Please furnish the necessary information below. This information is confidential and will be used accordingly. This section highlights your experiences and provides references on services provided in the past. Your signature below gives permission for us to contact previous employers and/or previous other places in which you provided volunteer service which includes children. Due to the integrity of the church and its mission to protect our children, all applicants will have to go through this screening process. **List every type of experience involving children (make copies if needed).**

EXPERIENCE:

Position Requested: _____

Reason for applying for position: _____

Qualifications/Experience for such position: _____

Dates and places of experience:

From: _____ To: _____ Where: _____

From: _____ To: _____ Where: _____

From: _____ To: _____ Where: _____

From: _____ To: _____ Where: _____

Were you ever dismissed or forced to resign due to inappropriate or questionable behavior? If so, please explain: _____

Have you been ever accused of inappropriate or questionable behavior involving children? If so, please explain: _____

Have you ever been convicted of inappropriate or questionable behavior involving children? If so, please explain: _____

REFERENCES:

Name: _____

Organization: _____

Address: _____

Phone: _____ Email: _____

Relationship (If any): _____

Name: _____

Organization: _____

Address: _____

Phone: _____ Email: _____

Relationship (If any): _____

Name: _____

Organization: _____

Address: _____

Phone: _____ Email: _____

Relationship (If any): _____

MAIL/FAX REFERENCE FORM

Name of Reference: _____

Interview Questions:

1. In what capacity did you know the applicant? _____

2. What position(s) did he/she hold? _____

3. How long have you known applicant? _____

4. Was applicant's service satisfactory or unsatisfactory? _____

5. If applicant is no longer working with your organization, why did he/she leave?

6. Based upon the knowledge/experience/character of applicant, would you recommend this applicant?

_____ Yes

_____ No

_____ Unsure

7. Are there any additional comments regarding client and/or suitability to perform services with our organization? If so, please list below:

Signature of Reference

Date

Permission to Contact References and Past Organizations
(Please Read Carefully)

In consideration of applying for a position in this organization, I agree and represent that:

- All information in this application is correct to the best of my knowledge.
- I authorize this organization and any references within the referenced organization, whether identified in this application, to give this organization information regarding my character, service, and fitness for service. I hereby release any individual, church, denominational agency or official, reference, or any other person or organization, including record custodians, both collectively and individually, and whether or not identified in this application, from **any and all liability** for damages of whatever kind of nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization, excepting only communication of knowingly false information. I further state that **I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** This is a legally binding release which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of this authorization shall be as valid as the original. I further understand that a criminal records check will be conducted on me, and I consent to any such check.

I (Check one of the following two options):

_____ Waive

_____ Do Not Waive

Any right that I may have to inspect any information provided about me by any person or organization described above. I have read and understand the above provisions, and agree to them.

Signature of Applicant

Date

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