



Greater Philadelphia Church of Christ  
Children's Ministry

## Application

(PLEASE PRINT LEGIBLY)

DATE: \_\_\_\_\_ REGION: HAVERTOWN NEW JERSEY NORTH UC UNITED OTHER \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_

TITLE: MR MRS MS SUFFIX: \_\_\_\_\_ NICKNAME: \_\_\_\_\_ GENDER: M F

### Contact Information

HOME PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_ TEXTING OK? YES NO

EMAIL ADDRESS: \_\_\_\_\_

### Preferences

WHICH AGE GROUP(S) DO YOU PREFER TO WORK WITH?

\_\_\_\_ BABIES \_\_\_\_ 2 - 3 YEARS \_\_\_\_ 4 - 5 YEARS \_\_\_\_ KINDERGARTEN \_\_\_\_ 1ST GRADE

\_\_\_\_ 2ND GRADE \_\_\_\_ 3RD GRADE \_\_\_\_ 4TH GRADE \_\_\_\_ 5TH GRADE \_\_\_\_ MIDDLE SCHOOL

CHECK ALL ROLES THAT YOU ARE INTERESTED IN SERVING

\_\_\_\_ SPECIAL EVENTS COORDINATOR \_\_\_\_ REGIONAL COORDINATOR

\_\_\_\_ TEACHER \_\_\_\_ SAFETY MONITOR

PLEASE RANK WHICH ROTATIONS YOU PREFER TO SERVE:

\_\_\_\_ TEAM A (JAN - FEB / JUL - AUG) \_\_\_\_ TEAM B (MAR - APR / SEP - OCT) \_\_\_\_ TEAM C (MAY - JUN / NOV - DEC)

WHICH SERVICES DO YOU PREFER TO SERVE: SUNDAY MIDWEEK EITHER

### Personal References

LIST TWO GPCC MEMBERS WHO KNOW YOU WELL (AND THEIR CONTACT INFORMATION)

NAME: \_\_\_\_\_ REGION: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ REGION: \_\_\_\_\_ PHONE: \_\_\_\_\_