

SERVANT LEADER APPLICATION

VICTORY CHRISTIAN CENTER

7700 S. Lewis, Tulsa, OK 74136

SERVANT LEADER MINISTRY

East Campus, Room 262

Phone: 918-491-7936

Fax: 918-491-7983

servantleaders@victory.com

Dear Applicant,

Thank you for your interest in becoming a servant leader at Victory Christian Center. It is our desire to help you get connected!

Please complete all parts of this application fully and accurately:

- Original color photograph attached
- Membership at Victory Christian Center
- Foundations Videos completed
- Explanation of "No" answers to Personal & Spiritual Life questions on a separate sheet of paper
- Personal testimony
- Criminal records check completed, signed and dated

As part of our reference checking process, we will be asking you to authorize a criminal records check in each of your states of residence since age 18. As we minister to a large number of children and youth, we must be very thorough in our screening process of applicants and careful to comply with government agency regulations regarding minors.

Submit your completed application to:

- 1) **Human Resources Department** at Victory's 24-7 Building, 81st & Delaware, Suite 262, or
- 2) **Volunteer Application Drop-Box** in the lobbies of the Worship Center.

If you have any questions, please contact me at the number listed above. Thank you again for your interest. We look forward to serving with you!

Sincerely,

Jon Bornert
Servant Leader Coordinator

Victory Christian Center

7700 South Lewis Avenue

Tulsa, OK 74136

918-491-7936

Attach original
color photo
here.

SERVANT LEADER APPLICATION

PLEASE TYPE OR PRINT CLEARLY IN INK COMPLETING ALL PARTS OF THE APPLICATION.

PERSONAL INFORMATION:

Date _____

Full Name _____ Spouse _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address _____ Employer _____

Names & Ages of Children Living at Home _____

Family Members Attending VCS or VBI _____

Family Members Attending Other Schools _____

Date Available _____ Days Available (Please Circle): *Sun Mon Tue Wed Thur Fri Sat*

AREAS OF MINISTRY:

Hours Available: Monday: from _____ to _____

In what areas of Victory Christian Center do you desire to serve? Tuesday: from _____ to _____

1. _____ Wednesday: from _____ to _____

2. _____ Thursday: from _____ to _____

3. _____ Friday: from _____ to _____

EXPERIENCE: Saturday: from _____ to _____

Please list any ministry experience, work experience, job skills or hobbies you have that might be helpful for us to know. Sunday: from _____ to _____

(You may attach a resume, if available.) _____

Please list any education or work training you have had that might be helpful for us to know. (For example: High School Diploma, College Degrees, Bible School courses, Ministry Training, etc.)

Do you speak any foreign languages? No Yes If Yes, which ones? _____

If Yes, what is your conversational level? Fair Moderate Fluent; Writing level? Fair Moderate Fluent

Revised 05/10 Servant Leader Ministry

PERSONAL & SPIRITUAL LIFE:

Prayerfully answer each question and indicate answers clearly. Allow the Holy Spirit to speak to your heart during this time. Also include dates as requested. (“No” answers do not necessarily prevent you from volunteering at Victory. Please enclose a separate sheet explaining any “No” answers.)

If you need more understanding of these questions and would like to speak with a Care Pastor or the Servant Leader Coordinator, or to give us a greater understanding of your explanations, please feel free to call the Servant Leader Ministry at 918-491-7936.

Yes No

- ___ ___ 1. Have you received Jesus Christ as your Savior and Lord? (Date _____)
- ___ ___ 2. Have you been baptized in water since you were saved? (Date _____)
- ___ ___ 3. Have you received the baptism of the Holy Spirit with the evidence of Speaking in other tongues? (Date _____)
- ___ ___ 4. Have you become a member of Victory Christian Center? (Date _____)
- ___ ___ 5. Have you completed the Foundations Video Classes? (Date _____)
- ___ ___ 6. Have you been attending church regularly for the past 12 months?
- ___ ___ 7. Are you a member of a Cell Group at Victory? (Name of group or leaders _____)
- ___ ___ 8. Do you pray and read the Bible regularly?
- ___ ___ 9. Do you walk in love toward others and have the peace and joy of the Lord in you life?
- ___ ___ 10. Are you free from unforgiveness or resentment toward any staff member at Victory?
- ___ ___ 11. Have you abstained from the use of alcoholic beverages, tobacco products and illegal drugs for at least the last 12 months?
- ___ ___ 12. Have you kept yourself from gambling (lottery, internet, casino, etc.) for at least the last 12 months?
- ___ ___ 13. Have you kept yourself from immoral sexual activity such as fornication and adultery for at least the last 12 months?
- ___ ___ 14. Have you kept yourself from pornography (*including movies rated R, X, or NC-17*) for at least the last 12 months?
- ___ ___ 15. Have you managed your finances so that you have paid your bills in a timely manner for at least the last 12 months?
- ___ ___ 16. Have you kept yourself from ever practicing homosexuality or incest?
- ___ ___ 17. Have you kept yourself from ever physically, emotionally or sexually abusing a child or an adult?
- ___ ___ 18. Have you lived in such a way that all the habits and other things in your life would be a good testimony of Jesus to others?
- ___ ___ 19. If you should need counseling while serving at Victory, do you agree to seek it and inform your Supervisor?
- ___ ___ 20. Have you lived in such a way you have not been convicted or plead “no contest” to a crime other than a minor traffic offense?
- ___ ___ 21. Have you been free from counseling or behavioral medications in the last 12 months?
- ___ ___ 22. Are you currently married? (How long? _____)
- ___ ___ 23. Are you currently living with your spouse?
- ___ ___ 24. Do you both plan to continue living together married?
- ___ ___ 25. Are you and your spouse (if married) both in agreement about your volunteering at Victory?
- ___ ___ 26. Is your immediate family in order and your home free from strife and arguments?
- ___ ___ 27. Is your entire immediate family content to make Victory their home church, attend services at least twice per week, and be an active part of the ministry?
- ___ ___ 28. If you have mature children, are they all born-again, Spirit-filled and living for Jesus?

*****Have you attached a separate sheet explaining any “No” answers?*****

PERSONAL REFERENCES: (*Do not list relatives.*)

	Name	Address	A/C & Phone #
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

PLEASE PROVIDE THE FOLLOWING INFORMATION REGARDING YOUR PREVIOUS CHURCH:

CHURCH NAME _____

PASTOR OR CONTACT NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE (____) _____

PLEASE READ BEFORE SIGNING

In the event I become a servant leader with Victory Christian Center, as a representative of the Ministry I will comply with all rules and regulations as set forth in the Servant Leader Handbook, policy manual, or other communications distributed to all who serve the ministry.

Please be reminded that each individual is responsible for the security and safety of their personal property (computers, instruments, purses, cell phones, PDA's, etc.) while serving or attending any ministry function.

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect the review of this application in an unfavorable way.

I authorize Victory Christian Center to contact my references to secure the information deemed necessary to evaluate my potential as a servant leader at Victory Christian Center.

I understand this information will be strictly confidential.

I waive any rights I might have to see the comments of my references.

I release all references and agencies, Victory Christian Center, and any associated organizations, employers, and agents from any potential liability for damages that could possibly accrue to me or my family as a result of providing information due to these requests.

I understand that any material omission or misrepresentation of any facts called for in this application is cause for immediate dismissal. I understand and agree that my service is for no definite period, and may be terminated at any time without previous notice by either party.

I understand:

- ~ That this application is not intended to create an employment contract, either express or implied;
- ~ That all servant leaders with the Victory Christian Center are at will and that either the servant leader or the Ministry can terminate the relationship at any time, for any reason;
- ~ That the Ministry has the right to change any policies, procedures or programs in accordance with the needs of the Ministry and those we serve without notice; and
- ~ That no representative of the Ministry has the authority to enter into any agreement with an employee, servant leader, or prospective employee or servant leader that is contrary to the foregoing.

I hereby acknowledge that I have read and understood the foregoing disclosure, and have answered all questions to the best of my knowledge.

Signature _____ Date _____

Print Name _____

Victory Christian Center
7700 South Lewis Avenue
Tulsa, OK 74136
Ph. 918.491.7936 Fax 918.491.7983
Authorization For Release of Background Information

In connection with my application for volunteer service with VICTORY CHRISTIAN CENTER, I authorize VICTORY CHRISTIAN CENTER, PROTECT MY MINISTRY, and or, TRAK-1, to solicit background information relative to my criminal record history. I understand that VICTORY CHRISTIAN CENTER may conduct inquiries into my background that may include criminal records, personal references and other public record reports pertaining to me.

I authorize without any reservation, any person, agency, or other entity contacted by VICTORY CHRISTIAN CENTER, PROTECT MY MINISTRY, or TRAK-1, or their agent for purposes of obtaining background report information, to furnish the above mentioned information.

I release VICTORY CHRISTIAN CENTER, PROTECT MY MINISTRY, and TRAK-1 employees and all persons, agencies and entities providing information or reports about me from any and all liability arising out of furnishing any such information or reports.

PLEASE PRINT CLEARLY IN INK COMPLETING ALL PARTS OF THIS FORM

FULL LEGAL NAME _____ DOB _____

OTHER NAMES USED _____ SS# _____

Please note: if your address is a rural route, or post office box, we must have City & County where mail was delivered

Current Address _____ City _____ Co. _____
St. _____ Zip _____ How long at this address? (Months/Years) _____

Previous Address _____ City _____ Co. _____
St. _____ Zip _____ How long at this address? (Months/Years) _____

Previous Address _____ City _____ Co. _____
St. _____ Zip _____ How long at this address? (Months/Years) _____

LIST ALL CITY/STATES RESIDED AT SINCE AGE 18: _____

Have you ever been convicted of a criminal offense? _____ Yes _____ No

If yes, explain the type of crime, date of conviction and city and state where the offense occurred

SIGNATURE _____ DATE _____