



“The Sunday-school work is no mere pastime, no holiday entertainments, but real work, requiring for its propelling power something more than a love of novelty, or a love of applause, or a pleasurable excitement. To carry us through triumphantly to the end, to make us persevering and hopeful under discouragements to give us courage in the face of obstacles and dangers, to make us tireless in effort, and exhaustless in invention, ever willing to learn in order that we may teach, ever ready to try a new method when old methods fail, and never willing to yield so long as any method remains untried by which we may bring a lost soul back to the fold of Christ – to do all this we need to feel, as Christ did, that one soul is really and truly of more value than the whole world beside. To have this conviction of the value of the soul, this burning love for the salvation of the souls, is the first, the incomparably greatest qualification of the Sunday School teacher. This can only be had in prayer and by the direct outpouring of the Holy Ghost.”

**John S. Hart, LL.D.**  
1871





# CHILDREN'S MINISTRY QUESTIONNAIRE

Thank you for applying to serve in the Children's Ministry at Calvary Chapel Temecula. Everyone involved in any part of Children's Ministry at CCTV is required to have an active Ministry Questionnaire on file. Please be aware that a background check is conducted on each applicant as a matter of church policy for the protection of the children God has entrusted to our care. **The information provided in this questionnaire is CONFIDENTIAL and will be kept in a locked filing cabinet, and reviewed ONLY by those necessary for approval.**

DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*\*\* Please print clearly, answer all questions, and return with a recent **PICTURE** and copy of your **DRIVER'S LICENSE / REAL ID / ID Card**. Please return your completed application in person to the Children's Ministry Pastor/Director -or- to the church office at **CALVARY CHAPEL TEMECULA**.

## PERSONAL INFORMATION

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birth date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  Male  Female Email: \_\_\_\_\_

Facebook @\_\_\_\_\_ Instagram @\_\_\_\_\_ Twitter @\_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: (        ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (        ) \_\_\_\_\_ - \_\_\_\_\_

Home Phone: (        ) \_\_\_\_\_ - \_\_\_\_\_ *May we call your work?*  Yes  No

Occupation: \_\_\_\_\_ Place(s) of Employment: \_\_\_\_\_

How long have you lived in CA? \_\_\_\_\_

Marital Status:  Single  Separated  Divorced  Widowed  Married (If married, spouses name: \_\_\_\_\_)

If married, please have your spouse sign stating that he/she is in agreement with you serving here at Calvary Chapel Temecula and understand the time commitment: *Signature:* \_\_\_\_\_

Children?  Yes  No If yes, please list: Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_

Are you active with Sports with your family during the week/weekend?  Yes  No If yes, please explain: \_\_\_\_\_

Is CALVARY CHAPEL TEMECULA your home church?  Yes  No

Do you regularly attend Calvary Chapel Temecula?  Yes  No How long have you attended? \_\_\_\_\_

Previously attended churches:

Church #1: \_\_\_\_\_ State: \_\_\_\_\_ How long did you attend? \_\_\_\_\_  
Church #2: \_\_\_\_\_ State: \_\_\_\_\_ How long did you attend? \_\_\_\_\_  
Church #3: \_\_\_\_\_ State: \_\_\_\_\_ How long did you attend? \_\_\_\_\_

Did you serve in any capacity at your previous churches?  Yes  No *If yes, please list below.*

(Church #1) Area served in: \_\_\_\_\_ Ministry Overseer: \_\_\_\_\_  
(Church #2) Area served in: \_\_\_\_\_ Ministry Overseer: \_\_\_\_\_  
(Church #3) Area served in: \_\_\_\_\_ Ministry Overseer: \_\_\_\_\_

In the Children's Ministry at Calvary Chapel Temecula I am interested in working with:

2 Year Olds – Kindergarten  1st – 5th Grade  Any Area

Have you ever been accused, convicted, or pleaded guilty to a felony?  Yes  No *If yes, please explain:*

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Have you ever been accused or charged with a crime or incident involving a minor?  Yes  No *If yes, please explain:*

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Do you have any communicable diseases?  Yes  No *If yes, please list:*

Have you had any training and/or certification in CPR or first aid?  Yes  No

Why do you desire to be in the Children's Ministry? \_\_\_\_\_

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Do you have any previous experience in a Children's Ministry here or any other church/organization? \_\_\_\_\_

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Any other experience ministering to children: \_\_\_\_\_

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List any special spiritual gifts, education, or other factors that have prepared you to work with children. \_\_\_\_\_

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Hobbies & interests: *(Things you like to do)* \_\_\_\_\_

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## SPIRITUAL INFORMATION

Are you a born again Christian?  Yes  No      How long have you been saved? \_\_\_\_\_

Brief Christian testimony: *(Please indicate year of spiritual birth)* \_\_\_\_\_

*(continued on next page)*

Brief Christian testimony (*continued*):

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Describe your spiritual walk with God at the present time: (*This is different from your testimony*)

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## DOCTRINAL INFORMATION

*It is important to us that those teaching our children would be in harmony with us on the basic doctrinal issues.*  
*Please select one answer each for each question.*

1. A child under the age of 12 is too young to understand the Bible.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
2. Jesus Christ is fully God and fully human.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
3. The Holy Spirit is an impersonal force. It is not God. It is not a person.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
4. When someone is sick, the only reasons are: because they have sinned or because they lack faith to be healed.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
5. The Book of Mormon is another <i>inspired</i> testimony of Jesus Christ.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
6. Do you believe in the bodily resurrection of Jesus?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
7. Does God exist in three persons as One God; the Father, the Son, and the Holy Spirit.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
8. Do you believe that the Bible is the inspired and authoritative Word of God without error in the original writings.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
9. As long as you have enough faith, you will be physically healed.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
10. A 5 year old child is too young to understand salvation.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
11. The only proof of being baptized with the Holy Spirit is speaking in tongues.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
12. Jesus never claimed to be God, but was a good, moral teacher.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
13. Repentance is necessary for salvation.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
14. Does the Bible have answers to all of man's problems and questions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
15. As Christians, does God hear our prayers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
16. Do you believe the church will be raptured before the Tribulation period?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
17. God created the Heavens and the Earth in 6 days.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
18. Do you believe in the Second Coming of Christ?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
19. Do you believe the Second Coming of Christ has already happened?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
20. Does God still work miracles today?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
21. Is there an actual Heaven and an actual Hell?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
22. Are all of our prayers answered?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
23. Is baptism necessary for salvation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

24. Why should a person be baptized? \_\_\_\_\_  
\_\_\_\_\_

25. How would you advise a parent who comes to you with this question: "My 10-year-old son wants to know how he can get to heaven. How can I explain that to him?" \_\_\_\_\_  
\_\_\_\_\_

26. Describe briefly the Ministry of the Church. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

27. Do you disagree with anything written in Calvary Chapel Temecula's doctrinal statement?  Yes  No  
If yes, which one(s), and why? \_\_\_\_\_  
\_\_\_\_\_

\*If you change your beliefs after submitting this application you are agreeing to notify the Children's Ministry Pastor/Director.  I AGREE

## REFERENCE & BACKGROUND INFORMATION

Please provide **3** references. **THIS IS MANDATORY**. List persons not related to you, who have known you at least one year. Please do not list a Calvary Chapel Temecula Pastor or anyone under the age of 18. Please provide the complete mailing address, phone number, and email of each one. If the information is not complete, this questionnaire will be returned to you for complete reference information. All **3** reference letters (*which the church will send out*) must be received prior to approval to serve in the Children's Ministry.

**PLEASE PRINT CLEARLY & COMPLETELY!**

1. Name: \_\_\_\_\_ Years known: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_ Relationship to this person: \_\_\_\_\_  
Email: \_\_\_\_\_

2. Name: \_\_\_\_\_ Years known: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_ Relationship to this person: \_\_\_\_\_  
Email: \_\_\_\_\_

3. Name: \_\_\_\_\_ Years known: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_ Relationship to this person: \_\_\_\_\_  
Email: \_\_\_\_\_

In addition, if possible, list a pastor, elder, or other leader at Calvary Chapel Temecula who can give you a reference.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_



We are excited that you are interested in being involved in the Children's Ministry  
at Calvary Chapel Temecula.

Here are a few reminders of the commitments required of each volunteer in the Children's Ministry:

**SPIRITUAL COMMITMENT:**

Understand that the same standards of personal conduct that apply to Pastor Joe (*Senior Pastor*) and all the pastoral staff also apply to every member of the Calvary Chapel Temecula ministry team. Please note that if you do become part of this team, that you are immediately placed in a position that requires an even greater level of responsibility and accountability before the Lord and His people.

**PRACTICAL COMMITMENT:**

Calvary Chapel Temecula team members are required to be at the church at the appointed time for their department. Punctuality is a must!

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The information contained in this application is correct to the best of my knowledge. I authorize any references listed in this application to give you any information that they may have regarding my character and fitness for children's ministry. In consideration of the receipt and evaluation of this application by Calvary Chapel Temecula, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that at any time result to me, my heirs, or family, because of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

In this ministry I will support the leadership of Calvary Chapel Temecula. If my application is accepted, I understand the impact my private life will have on this ministry, and those who I may not even know personally who attend Calvary Chapel Temecula. Thus, I will do my best to seek the Lord with all of my heart, soul, and mind.

Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent's Signature (*if under 18*): \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# CALVARY CHAPEL TEMECULA

[www.cctemecula.com](http://www.cctemecula.com)

27462 Enterprise Circle W. Temecula, CA 92590  
(951) 699-0553

## BACKGROUND INVESTIGATION CONSENT FORM

The information provided below is **CONFIDENTIAL** and will be reviewed, only by those necessary, for background check.

I, \_\_\_\_\_, hereby authorize Calvary Chapel Temecula and/or its agents to make an independent investigation of my background, character, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my questionnaire and/or obtaining other information, which may be material to my employment and/or volunteerism with Calvary Chapel Temecula.

I release Calvary Chapel Temecula and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or law suits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name, and all information is true and correct to the best of my knowledge:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Maiden Name -OR- Other Names Used: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: (      ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (      ) \_\_\_\_\_ - \_\_\_\_\_

Home Phone: (      ) \_\_\_\_\_ - \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

How long at this address? \_\_\_\_\_ County of address: \_\_\_\_\_

Former Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

How long at this address? \_\_\_\_\_ County of address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of issue: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_