



**CCHC – Herald Youth Center**  
 48 Allen Street  
 New York, NY 10002  
 Tel. 212.334.2033 x20  
 Fax. 212.334.2062

# Ministry Partnership Application

FOR OFFICE USE ONLY	
APP RECEIVED _____	INTERVIEW _____
INTERVIEWER _____	

Complete Application includes:

- Completed Application; Resume; 2 references, one must be from your spiritual leader (e.g. pastor, deacon, elder, small group leader, counselor, no relatives please); A photocopy of your driver's license or non-driver ID

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender:  M  F Status:  single  married  divorced  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Home # \_\_\_\_\_ Cell # \_\_\_\_\_ E-mail: \_\_\_\_\_ AIM: \_\_\_\_\_

Have you ever been convicted of any crime?  Yes  No Explain: \_\_\_\_\_

**Students:** School: \_\_\_\_\_ Field of Study: \_\_\_\_\_ Date of graduation: \_\_\_\_\_

**Working Professionals\*:** Company & Position Title: \_\_\_\_\_ Length of Time at Current Employment: \_\_\_\_\_

\*\*\*Please also provide a current copy of your resume\*\*\*

**I. Talents/Skills/Hobbies:** 1. Check all languages you know:  English  Mandarin  Cantonese  Toisan  Fujianese  Korean  
 Other: \_\_\_\_\_ 2. List your hobbies, talents and/or skills: \_\_\_\_\_

**II. Volunteer Experience:** 1. List any prior volunteer experiences: \_\_\_\_\_

2. Describe your most satisfying experience serving God: \_\_\_\_\_

**III. Church and Ministry** 1. Name of Church you currently attend: \_\_\_\_\_ Length of Attendance: \_\_\_\_\_

2. Are you a member?  Yes  No 3. Are you baptized?  Yes  No 4. Church ministries you serve in: \_\_\_\_\_

5. What are your spiritual gifts (if known)? \_\_\_\_\_

6. List some of your weaknesses (spiritual and/or practical). \_\_\_\_\_

7. Give a brief description of how you came to receive Christ as your Lord and Savior: \_\_\_\_\_

**IV. Herald Youth Center** 1. How did you find out about us?  Website  Friend  Church  Hope For NY  Other \_\_\_\_\_

2. What program are you applying for (Details available at [www.heraldyouth.org](http://www.heraldyouth.org))  BIG Mentoring  Herald Youth Center (After-school hrs & Saturdays)  Herald Volleyball Club  CCYL (Bball)  English Study Buddies Summer:  Herald Gospel Camp  Herald Volleyball

3. **For English Study Buddies & youth center:** What times are you available? Saturdays:  10-11am  11am-12p  1- 2pm  2-3pm  
 Weekdays:  M  Tu  We  Th  F  3-4pm  4-5pm  5-6pm How often each month?  1<sup>st</sup> wk  2<sup>nd</sup> wk  3<sup>rd</sup> wk  4<sup>th</sup> wk

**V. References** List 2 references. They should be someone whom you are currently in contact with and able to attest to your character. We prefer that ONE of them be your spiritual leader (a small group leader, pastor, church elder or deacon, etc.) If that is not possible, a friend and/or manager/supervisor is sufficient. Your second reference can be any of the above. Relatives cannot be a reference.

1. Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_ ☎: \_\_\_\_\_

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

2. Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_ ☎: \_\_\_\_\_

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

### AUTHORIZATION TO CHECK CRIMINAL RECORDS

I, \_\_\_\_\_, authorize CCHC to receive information from any law enforcement agency, including police departments and sheriff's departments of any state or federal government, to the extent permitted by state and federal law, pertaining to any convictions I may have had for violations of state or federal criminal laws, including but not limited to, convictions for crimes committed upon children. I understand that such access is for the purpose of considering my application as a volunteer.

Applicant's Signature \_\_\_\_\_ SS#: \_\_\_\_\_ Date: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_



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## REFERENCE FORM

**For Volunteer candidate to complete:**

Candidate Name: \_\_\_\_\_ Reference Name: \_\_\_\_\_  
Position Desired:  Tutor  Vball Coach  Camp Counselor  Asst. Camp Counselor  
 Mentor  Camp Intern  Other \_\_\_\_\_

**Reference Information:**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Church/Company/Org Name: \_\_\_\_\_ Position Title: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Best Time to Call:  Daytime  Evenings  Weekends  
E-mail: \_\_\_\_\_ Other: \_\_\_\_\_

**DIRECTIONS:** Please complete this reference form (2 pages) based on your first-hand knowledge of the candidate. This will greatly aid us to evaluate his/her eligibility for volunteering at a Christian ministry to serve inner city junior high and high school youth. Please provide the most candid assessment you are able.

1. What is your relationship to the candidate? \_\_\_\_\_

2. How long have you known the candidate? \_\_\_\_\_

3. Explain how well you personally know the candidate. \_\_\_\_\_  
\_\_\_\_\_

4. Please comment on the candidate's present Christian walk. \_\_\_\_\_  
\_\_\_\_\_

5. What are the candidate's strengths? \_\_\_\_\_  
\_\_\_\_\_

6. What are the candidate's weaknesses? \_\_\_\_\_  
\_\_\_\_\_

7. Is the candidate an active part of the church body?  Yes  No

7a. In what formal and informal ways does the candidate serve in the church? \_\_\_\_\_  
\_\_\_\_\_

8. Has the candidate had any kind of difficulty or problem with his/her family or friends that would make you question his/her effectiveness as a tutor, coach, general Christian ministry volunteer?  Yes  No

Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Please describe what it is you would like the candidate to learn/experience through this ministry.  
\_\_\_\_\_  
\_\_\_\_\_

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Candidate Name: \_\_\_\_\_ Reference Name: \_\_\_\_\_

10. Do you have any concerns or reservations about the applicant’s witness as a tutor, coach, general Christian ministry volunteer (e.g. the applicant is dating or married to a non-Christian)?  Yes  No If yes, please elaborate. \_\_\_\_\_

11. Please rate the candidate based on your prior experience with him/her.

	Excellent	Above Average	Average	Below Average	Cannot Determine
Spiritual maturity					
Emotional stability					
Sound judgment					
Dependability/Responsibility					
Enthusiasm					
Creativity					
Interpersonal Skills					
Youth Work					
Submission to authority					
Flexibility					
Assertiveness					
Ability to follow instructions					
Willingness to learn					
Ability to work under stress					
Patience					
Ability to serve joyfully					
Overall impression					

12. Would you recommend this person as a volunteer to a child of yours?

Yes  No Please elaborate: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**For additional comments, use a separate sheet of paper.**

**Please return directly to CCHC as soon as possible by mail, fax or email. This information will be kept confidential.**

Delays in receiving Reference Forms could result in a denial of the candidate’s acceptance.  
If you have any additional inquiries or concerns, please contact: Youth Dept: 212-334-2033 x20  
Fax: 212-334-2062



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4. Please comment on the candidate's present Christian walk. \_\_\_\_\_  
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5. What are the candidate's strengths? \_\_\_\_\_  
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Please explain: \_\_\_\_\_  
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11. Please rate the candidate based on your prior experience with him/her.

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Emotional stability					
Sound judgment					
Dependability/Responsibility					
Enthusiasm					
Creativity					
Interpersonal Skills					
Youth Work					
Submission to authority					
Flexibility					
Assertiveness					
Ability to follow instructions					
Willingness to learn					
Ability to work under stress					
Patience					
Ability to serve joyfully					
Overall impression					

12. Would you recommend this person as a volunteer to a child of yours?

Yes  No Please elaborate: \_\_\_\_\_  
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