

726 W. Old Hickory Blvd.  
 Madison, TN 37115  
 (615) 865-6655



## Preparation for Service Form

### Personal Data:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Ministry Background:

Are you a member of Cornerstone Church?  Yes  No If yes, how long have you attended Cornerstone Church? \_\_\_\_\_  
 If you are not a member of Cornerstone Church, what church are/were you a member of? \_\_\_\_\_  
 What is your denominational history? Baptist  Methodist  Church of Christ  Catholic  Other \_\_\_\_\_  
 How long were you there? \_\_\_\_\_ Are you in agreement with the beliefs of Cornerstone Church? \_\_\_\_\_  
 Are you born again?  Yes  No Are you baptized in the Holy Spirit with evidence of speaking in tongues?  Yes  No  
 Which service do you attend?  Saturday  Sunday Sunday school class attending: \_\_\_\_\_  
 Completed Discipleship 101?  Yes  No If yes, when? \_\_\_\_\_  
 Completed Discipleship 102?  Yes  No If yes, when? \_\_\_\_\_  
 Completed Finding the Rock?  Yes  No If yes, when? \_\_\_\_\_  
 Please check the position(s) you desire to receive more information on:

<u>Service Opportunities</u>		<u>Ministry Opportunities</u>	
<input type="checkbox"/> Coffee Shop	<input type="checkbox"/> Choir / Band	<input type="checkbox"/> Children's	<input type="checkbox"/> InFocus Prayer Line
<input type="checkbox"/> Cookie Corp. / Visitor Follow-up	<input type="checkbox"/> Donut Ministry	<input type="checkbox"/> Men's	<input type="checkbox"/> Seniors Ministry
<input type="checkbox"/> Greeters	<input type="checkbox"/> Media-Sound/Video	<input type="checkbox"/> Nursery Worker	<input type="checkbox"/> Prison
<input type="checkbox"/> Parking Lot Ministry	<input type="checkbox"/> Special Dinners	<input type="checkbox"/> Singles	<input type="checkbox"/> Teaching
<input type="checkbox"/> Ushers	<input type="checkbox"/> Welcome Center	<input type="checkbox"/> Women's	<input type="checkbox"/> Youth
		<input type="checkbox"/> Missions	

List any and all previous church involvement, training, and/or educational background that would be beneficial for this position: (Use reverse side if additional space is needed.)

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When is the best time for a follow-up call? \_\_\_\_\_ AM/PM (circle one)

### **Compliance Signature and Pastoral Approval:**

The information contained in this service form is correct to the best of my knowledge. I agree to be bound by the Constitution and Bylaws and Policies of Cornerstone Church, and to refrain from unscriptural conduct in the performance of my services on behalf of the church. *I release and give permission to Cornerstone Church to gather pertinent information through appropriate background checks of my personal character and criminal history which are required for me to accomplish my ministerial duties.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pastoral Approval: \_\_\_\_\_ Date: \_\_\_\_\_

<b>OFFICE USE ONLY</b> – Please forward to appropriate pastor for follow-up.					
<input type="checkbox"/> Youth	<input type="checkbox"/> Children's	<input type="checkbox"/> Worship	<input type="checkbox"/> Helps	<input type="checkbox"/> Adult Ministries	