

Calvary Chapel Church, Inc.

Calvary Chapel Relief

References and Spiritual Questionnaire

REFERENCES

Please give the names and phone numbers of two references:

Pastoral Reference: _____ Phone #: (____) _____

Other Reference: _____ Phone #: (____) _____

CHURCH / MINISTRY INFORMATION

Church Name: _____

Are you a Member? _____ How long have you attended? _____ Yrs. _____ Mo.

Church Address: _____ City: _____

State: _____ Zip: _____ Phone #: (____) _____

What church activities have you been involved in?

What leadership experience/positions have you had or held?

What cross-cultural ministry experience do you have?

What experience/training have you had in evangelism?

Do you play a musical instrument or lead worship?

PERSONAL SPIRITUAL LIFE

When were you born again/received Christ as your Lord and Savior?

How would you describe your relationship with God / your walk with Christ?

If you were to die tonight, do you know for certain you would go to heaven, if "Yes" then why?

What foreign countries have you traveled in and when?

Which foreign country immigration stamps are in your passport?

List any government/military experience as well as additional professions or skills (i.e. doctor, firefighter, contractor, pilot, teacher, etc.):
