

Updates

Youth Staff

Name _____ Chinese name _____

Birthdate ____ / ____ / ____ Age _____ Profession _____

Employer (& work address) _____

Intended degree and graduation date (students only) _____

CONTACT INFO

Address _____ Town, Zip _____

Phone (_____) _____ Cell phone (_____) _____

E-mail address _____ Alternate e-mail _____

Webpage _____

Xanga _____ IM _____

Best method of contact (indicate YES or NO, circle most preferred):

call on cell anytime call at work call at home email IM

FAMILY INFO

Spouse's (or significant other) name _____

Spouse's (or significant other) birthdate ____ / ____ / ____ Anniversary date ____ / ____ / ____

Spouse's (or significant other) e-mail _____

Children (birthdates & ages) _____

Preferred visit times back home to parents _____

Parent's Phone (_____) _____ Place of residence _____

PERSONAL INFO

CBCGB youths you connect well with: _____

Closest friends in CBCGB: _____

Persons who influenced your life the most: _____

Important things to accomplish this year: _____

Skills, talents, abilities, hobbies to contribute (technology, music, drama, writing, photo, etc.): _____

Please place an **X** in the box where it best describes your current condition:

Introvert	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Extrovert
Disciplined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procrastinator
Supportive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Critical
Optimistic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pessimistic
Follower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Initiator
Tolerates criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hypersensitive
Emotionally stable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Depressed
Athletically strong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physically weak
Disorganized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Organized
Learning-challenged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intellectually astute
Non-existent faith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spiritual faith-full
Perseverant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Easily discouraged

CHURCH COMMITMENT INFO

Date & occasion of conversion: _____

Date & place of baptism: _____

Have you ever been in a discipleship / mentored relationship? _____

Are you a formal CBCGB member? _____

SECURITY INFO

Have you ever been arrested for or convicted of any criminal act more serious than a traffic violation? Yes No (If yes, please explain.)

Have you ever been accused or convicted of child abuse, sexual abuse or sexual misconduct?
 Yes No (If yes, please explain.)

Were you a victim of abuse or molestation while a minor?
 Yes No (If yes, please explain.)

Do you possess a valid driver's license, insurance coverage, and a clean driving record?
 Yes No (If no, please explain.)

*Please note our **youth ministry driving policy**: A teen is never asked to give another teen a ride home, nor asked to drive on planned youth activities—any exception must have the permission of ALL parents involved. Parents have the ultimate responsibility to bring their child home, and same-gender counselors will help with rides whenever possible. It is currently illegal in MA for a "junior licensed operator" (has a license for 6 months or less) to drive anyone other than the immediate family member, at the allowable hours (not between 12 midnight to 5:00am). Teens must call parents in any circumstance out of the ordinary to get permission first.*

MY COVENANT TO CHRIST AND THE CHURCH:

I believe in the ministry of the Chinese Bible Church of Greater Boston. With God's help, I will be involved and faithful in my assigned ministry, attend meetings and training sessions unless providentially hindered, follow the leadership of my area, and seek to live a consistent Christian life. I willingly and joyfully commit myself to the ministry of the church for the glory of Jesus Christ.

I give my authorization to Chinese Bible Church of Greater Boston to verify the information on this form. The pastoral staff and church leaders of CBCGB may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a volunteer ministry staff worker.

Signature_____Date_____

Please PRINT:

Name_____

Maiden Name_____

All Aliases_____

Date & Place of Birth_____

Social Security Number_____