

# MAGNIFICATION MINISTRY APPLICATION

Recognizing that the Magnification Ministry at CHC is a leader of worship from the platform each week, we do not take your participation lightly. While these questions may seem a bit personal, they are necessary in order for the Magnification Ministry to know how to help you grow closer in Christ. Be assured that all information provided by you on this form will be held in strict confidentiality.

PLEASE PRINT LEGIBLY

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

**Area of Interest (circle any that apply):**

Worship Arts

Choir, Band

Creative Arts

Drama

Technical Arts

Lights, Camera  
Sound, Video

Media Connections

Production & Distribution

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

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

Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: Male Female

Marital Status: (Circle One) Married Divorced Single Widowed Remarried

**SPIRITUAL BACKGROUND**

When did you commit your life to Christ? \_\_\_\_\_

Briefly describe your salvation experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SPIRITUAL HABITS**

How long have you been a member of Colonial Hills Church? \_\_\_\_\_

Are you faithful to the Biblical principle of tithing 10% of your income? Yes No

Are you involved in a small group of CHC? Yes No

I would describe my quiet time as (circle one): Consistent Periodic None

Are you faithful in attending weekly services? Yes No

If no, please explain \_\_\_\_\_

\_\_\_\_\_

**STUDENTS ONLY:**

Are you involved in the Student Ministries at CHC (primarily a Student Small Group)? Yes No

If no, please explain . \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL CONVICTIONS**

Have you or your spouse ever been convicted of a felony? Yes No

Do any current activities in your personal life conflict with any Biblical values or principles (i.e. alcohol, tobacco, drugs, gambling, pornography, etc.) Yes No

**CHC EQUIPPING**

Are you a member of Colonial Hills Church? Yes No If yes, how long have you been a member? \_\_\_\_\_

Have you completed the CHC Membership Process of the Front Door? Yes No

If no, are you in the process? Yes No

**FINANCIAL INFORMATION**

Your occupation: \_\_\_\_\_

Spouse's occupation: \_\_\_\_\_

Are you faithful in paying your bills? (circle one) Yes No

If no, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Does your employer or occupation conflict with any Biblical values or convictions? (circle one) Yes No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

<b>OFFICE USE ONLY:</b>	
Approved by: _____	Date: _____
Assigned Mentor: _____	Date: _____