



**INSTRUCTIONS**

- 1) Please print ALL information CLEARLY
- 2) Please complete both sides of this application
- 3) Sign and date the application

# OCC ADULT HELPS MINISTRY APPLICATION

LAST NAME		FIRST NAME		M.I.	
STREET ADDRESS			CITY		STATE ZIP
HOME PHONE		WORK PHONE		CELL PHONE	
MEMBER NUMBER OR SSN		EMAIL ADDRESS			
GENDER		SOCIAL STATUS			
MALE <input type="radio"/>		SINGLE <input type="radio"/>		MARRIED <input type="radio"/>	
FEMALE <input type="radio"/>		19-21 <input type="radio"/>		22-25 <input type="radio"/>	
		26-30 <input type="radio"/>		31-35 <input type="radio"/>	
		36-45 <input type="radio"/>		46-55 <input type="radio"/>	
		56-65 <input type="radio"/>		Over 65 <input type="radio"/>	
EMPLOYMENT STATUS					
<input type="radio"/> ENTREPRENEUR <small>(List type of business)</small>		<input type="radio"/> EMPLOYED <small>(List current occupation)</small>		<input type="radio"/> UNEMPLOYED	
				<input type="radio"/> STUDENT	
				<input type="radio"/> RETIRED	

**APPLICATION STATUS**

- NEW APPLICANT
- ANNUAL UPDATE
- List current ministry involvement below:

**If you believe the Lord has already given you direction on where to serve, please list them below in order to preference: (Three choice maximum)**

<b>1</b>	<b>2</b>	<b>3</b>
----------	----------	----------

**Please respond to the following questions by checking the appropriate boxes and providing all dates if you are a new applicant.**

	YES OCC	YES Another Church	NO	DATES		NO	YES
<b>Born Again?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<b>Drinking Alcohol</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Water baptized in Jesus' Name?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<b>Using Drugs</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Spirit-filled (with the evidence of speaking in other tongues)?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<b>Smoking (any form)</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Successfully completed FM Classes?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<b>Gambling</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Consistent tithing (Last six months)?</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	<b>Stealing</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Lying</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Gossiping</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Speaking against the Pastor/Church</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Adultery</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Fornication</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Homosexuality</b>	<input type="checkbox"/>	<input type="checkbox"/>
					<b>Living with someone of the opposite sex (not a spouse or relative)</b>	<input type="checkbox"/>	<input type="checkbox"/>

**Please answer the following questions by checking the appropriate boxes along with a brief explanation.**

- Are you living, in any way, that does not exemplify a life of holiness and purity, or could potentially bring shame or embarrassment to yourself or the ministry? NO  YES   
\_\_\_\_\_
- Are you an active member or have you made any pledges or oaths to any organizations, groups or persons, such as Masons, Eastern Star, astrology, fraternities/sororities, witchcraft or Satan worship, which would be inconsistent with the Bible and your commitment to Christ? NO  YES   
\_\_\_\_\_
- Have you ever received financial assistance (benevolence) from OCC? NO  YES  \_\_\_\_\_