APPLICATION PROCESS

Step One | Sensing God's Leadership

- · You realize you have the gifts, commitment, and desire to become a Stephen Minister.
- You've felt God's "tap on your shoulder" to pursue the application process.
- · You aren't quite sure at this point. Perhaps you need to seek God's guidance through prayer and begin the application process.



Step Two The Application Phase

· The Stephen Minister Application may be turned in at the Church Office or emailed as a saved PDF to Ben Tyvoll (ben.tyvoll@calvarychurch.us) or mailed to:

Calvary Church Attn: Stephen Ministry 2120 Lexington Ave N Roseville, MN 55113

· All applications will be carefully and prayerfully evaluated by the Stephen Ministry Leadership Team.

Step Three The Interview Phase

- · If the Stephen Ministry Leadership Team determines you have the potential to become an effective Stephen Minister, a personal interview will be scheduled.
- Potential candidates will be notified in advance regarding an appointment time, and will be asked to meet with two Stephen Ministry Leaders for 30-45 minutes.
- · Following the completion of all interviews, the final selection of candidates will be determined by the full Stephen Ministry Leadership Team and candidates will be invited to begin training as a Stephen Minister. Anyone not selected to become a Stephen Minister will be notified by the Stephen Ministry Leadership Team.

CONTACT INFO

All information will be kept	confidential.			
Name			_ Date of B	irth (MM/DD/YYYY)
Address			Phone (C	ell)
			Phone (W	/ork/Home)
Birth Date	Email			
CALVARY CHURCH STA	NTUS			
How long have you called	Calvary Church yo	ur home?		
Campus you attend most of	often:	O Roseville (Campus	O White Bear Campus
FAMILY				
Marital Status: O Singl	.e O Married	O Widowed	O Divo	rced
Name of Spouse (if married	d)			
Please list your children be	elow.			
Name			Birth Dat	e
Name			Birth Dat	e
Name				e
Name			Birth Dat	e
Name			Birth Dat	e
QUESTIONS REGARDIN	IG STEPHEN M	INISTRY		
1. Describe why you are int	erested in becom	ing a Stephen I	Minister	

2. What strengths or spiritual gifts do you believe God has given you that would help you serve
effectively as a Stephen Minister?
3. In what ways do you think you would benefit personally from your training and service as a Stepher Minister?
4. Based on your current understanding of what it means to be a Stephen Minister, what do you think would be difficult or challenging aspects of this role for you?
5. How would people who know you describe the way you relate to others?

6. Are you willing to commit to serve fait	thfully for a period of no less than two years ?
Keep in mind that after the initial 50-	nour training you will begin:
 Regular visits to your care rece 	eiver (weekly or a mutually agreed-upon frequency)
 Twice-monthly Small Group Pe 	eer Supervision and Continuing Education (2.5 hours)
O Yes O No	
What changes would you need to mak	ke in your life to fulfill this commitment?
7. Describe briefly your relationship with	Jesus Christ.
8. Have you ever received treatment for a	any emotional or nevehiatric problems?
O Yes O No	any emotional or payematric problems.
If you answered yes, someone from the Step may better understand its significance in you	ohen Leader Team will speak with you about this so that the team ur life and ministry.
themselves have received, including care fro affirms the work of mental health profession	ade stronger in their caregiving ministry through the care they m mental health professionals. Your Stephen Leader Team nals, who have helped many individuals to experience growth and am request this information because they want to be as fully inisters.
9. Have you ever been charged with a cri	me?
O Yes O No	
If you answered yes, please explain in detail,	using additional paper. Someone from the Stephen Leader Team

will speak with you about this, so that the team may better understand its significance in your life and ministry.

REFERENCES

Please provide three references, only one of which is a Calvary Church attendee/member, and one of which is a family member.

1. Reference	
Name	Relationship
Address	Phone (Cell)
	Phone (Work/Home)
Email	
2. Reference	
Name	Relationship
Address	Phone (Cell)
	Phone (Work/Home)
Email	
3. Reference	
Name	Relationship
Address	Phone (Cell)
	Phone (Work/Home)
Email	
participate in Stephen Ministry training, in Sma Stephen Ministry as adopted by Calvary Church a background check on me. If I am selected to be a Stephen Minister, I agre a Stephen Minister and agree that my appointn	cion is true and complete to the best of my knowledge. I agree to all Group Peer Supervision, and to function within the boundaries of an I give Calvary Church permission to call my references and secure see to be accountable to the Stephen Leader Team when serving as ment may be ended at any time the Team determines that it would be exstand that I am not authorized to obligate Calvary Church in any
NAME	
(Please Prin	
SIGNATURE	DATE



MAIL OR RETURN APPLICATION TO:

Calvary Church Attn: Stephen Ministry 2120 Lexington Ave N Roseville, MN 55113 651.487.2855

OR EMAIL APPLICATION TO:

ben.tyvoll@calvarychurch.us (Re-save pdf with your name.)