



**Application for Creative Arts Ministry  
At Stones Crossing Church**  
*Please fill out and bring to audition/interview*

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthday \_\_\_\_\_

Email \_\_\_\_\_ Home Ph. \_\_\_\_\_ Work/Cell \_\_\_\_\_

Address \_\_\_\_\_

Area of Interest \_\_\_\_\_

How long have you been attending SCC? \_\_\_\_\_ Are you a member? \_\_\_\_\_ Date joined \_\_\_\_\_

Have you accepted Christ as your Lord and Savior? \_\_\_\_\_ When? \_\_\_\_\_

Describe that experience \_\_\_\_\_

How often do you attend? \_\_\_\_\_ Do you currently serve in a ministry? \_\_\_\_\_

Which ministry and in what capacity? \_\_\_\_\_

What training and/or experience do you have in this area of ministry? \_\_\_\_\_

What are your primary strengths? \_\_\_\_\_

How would you like to grow in this ministry? \_\_\_\_\_

Why do you desire to serve in this ministry? \_\_\_\_\_

What is God teaching you in your time alone with Him? \_\_\_\_\_

What drew you to SCC? \_\_\_\_\_

Are you interested in behind the scenes ministry? \_\_\_\_\_ In what capacity? \_\_\_\_\_

When can you begin serving? \_\_\_\_\_ How often would you be available? \_\_\_\_\_