

Campus Crusade for Christ International
CAMPUS AFFILIATE APPLICATION

Campus Affiliate: An official Campus Crusade for Christ lay volunteer working on a college campus

CONFIDENTIAL

Date _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Soc. Security # _____ - _____ - _____ Date of birth ____ / ____ / ____

Marital Status: _____ Single _____ Engaged _____ Married _____ Divorced
If married, wedding date _____ If engaged, proposed wedding date _____
Spouse's/Fiance's name _____

Educational Background:
College(s) attended _____ Dates _____
_____ Dates _____
Degree(s) received _____ Major _____ Graduation date _____
Current status : _____ Out of school _____ In school
Do you plan on returning to school? _____ Yes _____ No If yes, when? _____

Employment History:
Are you currently employed? _____ Yes _____ No
Current employer _____ Date employed _____
Address _____
Type of work _____
Previous employer _____ Date employed _____
Address _____
Type of work _____

MINISTRY QUESTIONNAIRE

A. INTENDED MINISTRY

1. Briefly state your reasons for making this application. _____

2. Name, address and phone number of the staff member with whom you will have a sponsoring relationship.

Because relationships and accountability are important, a Campus Affiliate is required to be sponsored by a full-time campus staff member. If you do not have a sponsor, please contact your regional director or the National Campus Affiliate Office in Orlando (407- 826-2538). Please do not apply until you have a sponsor.

3. Intended location of ministry (school name and city) _____
4. Number of hours a week available to invest in this ministry _____
5. Briefly state how you see yourself investing this time. _____

B. TESTIMONY

Please share briefly when and how you became a Christian and give a brief statement of your Christian growth experience.

C. CHURCH AFFILIATION

- 1. Name of church now attending _____
Denominational affiliation _____
- 2. Are you a member? ____ Yes ____ No If so, for how long? _____
At present, how often do you attend services? _____
- 3. Are you a licensed or ordained minister? ____ Yes ____ No Date _____
Ordained/Licensed by whom? _____

D. CAMPUS CRUSADE FOR CHRIST DISTINCTIVES

- 1. What do you feel is Campus Crusade's approach to evangelism? _____
_____ Do you agree with it? ____ Yes ____ No
- 2. Do you agree with the content of the Holy Spirit booklet? ____ Yes ____ No If not, please explain.

- 3. Do you agree with the content of the Four Spiritual Laws booklet? ____ Yes ____ No If not, please explain.

- 4. What are your views on the practice of speaking in tongues? _____

Do you currently speak in tongues? _____

The calling of Campus Crusade for Christ is to promote evangelism and discipleship. Realizing that there is a division in the body of Christ over the matter of speaking in tongues, we as an interdenominational movement have chosen not to take sides in the issue of whether or not tongues is valid today. We are also aware that many people who practice speaking in tongues seek to promote speaking in tongues with others. To allow this to take place in the context of our movement would detract from the nature and calling of our movement. Therefore, we ask that Campus Affiliates refrain from the public and private exercise of tongues and the promotion of tongues. On the basis of this statement, do you understand and agree with our policy concerning speaking in tongues?

____ Yes ____ No

5. Campus Crusade for Christ asks its Campus Affiliates to maintain two essential characteristics in their lives; a heart for God and a teachable attitude. Do you agree with this emphasis? ____ Yes ____ No

6. God admonished believers to regularly assemble for worship and encouragement. As a tangible expression of this belief, Campus Crusade for Christ requires that our Campus Affiliates attend an organized, established Christian church whose basic and founding doctrine is in the mainstream of Biblical Christianity. Do you agree with this guideline? ____ Yes ____ No

E. ABILITIES

- 1. What do you feel are personal strengths that will help you in being an effective Campus Affiliate?

2. What areas do you feel need development? _____

3. Do you possess any special skills or have experiences that could be used to support a local Campus Crusade ministry?

_____ Secretarial _____ Administrative _____ Hospitality _____ Computer _____ Graphics and Art
_____ Photography/Media _____ Music _____ Teaching/Speaking _____ Fund Raising _____ Journalism
_____ Other (please describe): _____

F. PERSONAL INFORMATION

1. Have you ever been treated for a nervous, mental or emotional disorder? _____ Yes _____ No

If so, when? _____

What was the nature of this disorder? _____

2. Have you ever used narcotics, hallucinogens or drugs not prescribed by a physician? _____ Yes _____ No

If so, please explain. _____

3. Do you now drink alcoholic beverages? _____ Yes _____ No If so, how frequently? _____

4. Do you now smoke? _____ Yes _____ No

5. Are you willing to give up any social habits that might lessen your effectiveness as a Campus Affiliate?

_____ Yes _____ No

6. Have you had or do you now have any homosexual experiences? _____ Yes _____ No If so, please explain. _____

7. Within the past twelve months, have you had any non-marital sexual experiences (i.e. intercourse, mutual nudity, heavy petting)? _____ Yes _____ No If this has happened, you will most likely be asked to wait to establish successful control in this area for at least a year's time before applying to be a Campus Affiliate.

8. Have you ever been convicted of a crime? _____ Yes _____ No If so, please give the date, location and disposition of the case. _____

9. If married, briefly state your spouse's attitude toward your volunteering time with this ministry. _____

G. MINISTRY EXPERIENCE (Check the appropriate lines)

1. Shared the Four Spiritual Laws. Number of times: _____ 1 -9 _____ 10-50 _____ over 50

2. Individually led person(s) to Christ. Number of People: _____ 1-4 _____ 5-10 _____ over 10

3. Shared personal testimony at an evangelistic meeting. Number of times: _____ 1 -4 _____ 5-10 _____ over 10

4. Given an evangelistic message. Number of times: _____ 1-4 _____ 5-10 _____ over 10

5. Shared the Holy Spirit booklet. Number of times: _____ 1 -9 _____ 10-50 _____ over 50

6. _____ Discovery Group leader

7. _____ Training Group leader

8. _____ Action Group leader

9. _____ Central/Master Action Group member

10. _____ Emcee of meeting

11. _____ Song or music leader

12. _____ Other, including activities or positions of leadership you have been involved in with your church.

H. CAMPUS CRUSADE TRAINING (Check the appropriate lines)

1. _____ Christmas Conference - _____ year(s)
2. _____ Big Break/Panama City Beach - _____ year(s)
3. _____ U.S. Summer Project - _____ location and year(s)
4. _____ Int'i Summer Project - _____ location and year(s)
5. _____ STINT - _____ location and year(s)
6. _____ School of Leadership _____ year(s)
7. What other training or experiences, Christian or secular, have you had that would enhance your ministry?

8. When were you involved with CCC's campus ministry? _____

I. CAMPUS CRUSADE STAFF EXPERIENCE

1. Have you ever applied for Campus Crusade Staff? _____ Yes _____ If so, date: _____ Results: _____
2. If you ever were on staff, what were your assignments?

When did you leave staff? _____ Reason(s)? _____

J. FINAL INFORMATION (not used to determine acceptance)

1. Would you like an account number to be able to develop financial support for ministry expenses? ___ Yes ___ No
2. Have you received and reviewed the following: Campus Affiliate Position Focus Sheet? ___ Yes ___ No
Questions and Answers about Becoming a Campus Affiliate? _____ Yes _____ No

Reference forms are enclosed with this application. It is your responsibility to give them to three appropriate people and have them return the forms in a sealed envelope. Send them along with this application to the office listed on the cover letter. (If the cover information is missing call 407-826-2538.) Also, be sure to enclose a signed Campus Crusade for Christ Statement of Faith. (Or send a written explanation as to why you feel you cannot sign it.)

I declare by my signature below that to the best of my knowledge, all of the information in this application is true and complete. I also authorize you to make such inquiries as may be necessary in arriving at an acceptance decision. I hereby release employers, schools, or persons from liability in responding to inquiries in connection with my application. I am aware that if accepted as a Campus Affiliate, I am responsible to raise whatever financial support is necessary to fund my ministry expenses, or to cover all such expenses personally.

Signature of applicant _____ Date _____