



YOUTH MINISTRY
642 Telfair Street • Augusta, Georgia 30901
706.262.8849 • firstpresaugusta.org

FPC Youth Student Leader Application

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Email Address _____

How often do you check your email? (Check one)

Daily Weekly Monthly Never

School _____ Grade _____

References: Please provide a person for each of the following categories that will be able to give us insight into your relationship with Jesus and your ability to work with others (please do **not** include FPC youth staff members).

Teacher: _____ Phone _____

Other adult: _____ Phone _____

Friend: _____ Phone _____

I acknowledge that I have read the Youth Ministry Leader Guidelines and will commit to (as the Lord allows) fulfilling each of these expectations if I am chosen to be a Student Leader.

SIGNATURE

DATE

Questions- Please answer thoroughly (at least 2 paragraphs for each) **on another sheet** and attach it.

1. Describe how you became a Christian.
2. What do you see as the most important parts of being a FPC Youth Student Leader?
3. Why do you want to be a FPC Youth Student Leader? Be specific.
4. What strengths **and** weaknesses would you bring to the team?
5. What are your hobbies and interests?
6. What things have you been involved with in the last 6 months that have helped you grow in your relationship with the Lord?
7. Who has impacted you or been a big influence in your walk with Christ?
How?
8. What has God been teaching you in the last month? Be specific.
9. Explain the Gospel.
10. Choose a passage of Scripture that is meaningful to you and explain why it is important to you.