

Stephen Minister Application

Confidential

You may return this application by email, regular mail, or hand delivery to Kim Price or Barbara Lewis.

For email, please send it to stephen.ministry@crossroads.org

For regular mail, please send to:

Crossroads Fellowship
2271 E. Millbrook Rd
Raleigh, NC 27604
ATTENTION: Stephen Ministry

For hand delivery, please call Kim Price at 919-205-8990 or Barbara Lewis at 919-961-0431

In order to be considered for the fall 2017 training session, this application must be returned by Sunday, August 1, 2017.



6. Are you willing to commit to serve faithfully for a period of no less than two years? This includes:
- ▶ the initial 50 hours of training;
 - ▶ regular visits to your care receiver (weekly or a mutually agreed-upon frequency); and Twice-monthly Small Group Peer Supervision.

Yes No

What changes would you need to make in your life in order to fulfill this commitment?

7. Describe briefly your relationship with Jesus Christ.

8. Please provide three references (at least one who is not a member of Crossroads Fellowship).

a. Name _____

Address _____

Relationship _____

Phone number _____

Email _____

b. Name _____

Address _____

Relationship _____

Phone number _____

Email _____

c. Name _____

Address _____

Relationship _____

Phone number _____

Email _____

Have you ever received treatment for any emotional or psychiatric problems?
 Yes No

If yes, 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.

[Note: A great many caregivers have been made stronger in their caregiving ministry through the care they themselves have received, including care from mental health professionals. Your Stephen Leader Team affirms the work of mental health professionals, who have helped many individuals to experience growth and healing. Members of the Stephen Leader Team request this information because they want to be as fully informed as possible about their Stephen Ministers.]

9. Have you ever been charged with a crime?
 Yes No

If yes, explain in detail, using additional paper as needed. 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.

Please read and sign below.

The information I have provided in this application is true and complete to the best of my knowledge. I agree to participate in Stephen Ministry training, in Small Group Peer Supervision, and to function within the boundaries of Stephen Ministry as adopted by my congregation. I give permission for the congregation to call my references and consult with the treating physician[s] or other mental health professionals regarding the nature of any treatment I have received for emotional or psychiatric problems.

Signature _____ Date _____