

Lake Shore Baptist Church | Children's Minister Applicant Information

PERSONAL INFORMATION

FULL NAME: _____
 First Middle Last

ADDRESS: _____
 Street Address Apt/Suite

 City State Zip Code

EMAIL ADDRESS: _____ PHONE NUMBER: _____

HOW DID YOU HEAR ABOUT THIS POSITION?

REFERENCES

These individuals will be contacted only if you progress in our search process.

#1 FULL NAME: _____

COMPANY: _____ PHONE NUMBER: _____

YOUR RELATIONSHIP TO THIS INDIVIDUAL: _____

#2 FULL NAME: _____

COMPANY: _____ PHONE NUMBER: _____

YOUR RELATIONSHIP TO THIS INDIVIDUAL: _____

#3 FULL NAME: _____

COMPANY: _____ PHONE NUMBER: _____

YOUR RELATIONSHIP TO THIS INDIVIDUAL: _____

Please submit this applicant information sheet along with your letter of interest and resume in the same email to childrensministersearch@lsbcwaco.org to apply for this position.