



7700 NCR 1200 E
Charleston, IL 61920
Office: 217.345.2028

BOARD OF DIRECTORS APPLICATION FOR MEMBERSHIP

Name _____ Date _____

Address _____

Phone number _____

Current Employer _____

EDUCATION

(Please list school name, year graduated, and degree.)

High School _____

Undergraduate _____

Graduate _____

Hobbies/Interests _____

Name of Church _____

Name of Pastor _____

Church ministries in which you are involved _____

Please include a letter of recommendation from your pastor or ministry leader.

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Have you ever been previously charged with or arrested for a felony or misdemeanor involving a minor? YES _____ NO _____

If yes, explain _____

Answer the following in paragraph form. Include additional sheets of paper if necessary.

What is your salvation testimony? _____

Why do you desire to be a member of the CCA Board of Directors? _____

What experience do you have being on a board? What skills do you feel you have to offer the CCA Board of Directors?

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What is your philosophy in regard to Christian Education? _____

Include any additional comments that you feel would be helpful in evaluating this application:

Do you agree with CCA's Statement of Faith? YES _____ NO _____

AUTHORIZATION

Please read carefully and sign your name if you agree to the terms of this understanding.

"I hereby certify that the statements made by me in this application and all related information which I have provided are true, accurate, and complete to the best of my knowledge. I understand that if I provide any false, inaccurate, or incomplete information, I will not be eligible for candidacy, or if I am accepted for membership, I will be subject to disciplinary action or dismissal regardless of the date on which the Board of Directors discover the violation."

Signature

Date