



Parent Support Fellowship

Leadership Team Application

Any person desiring to serve on the Crossroads School PSF Leadership Team should complete the following application and turn it in to the elementary school office. The application will be forwarded to administration.

1. Name _____

2. Children's names/grades _____

3. Position desired (1st, 2nd & 3rd choice):

___ President

___ Secretary

___ Treasurer

___ Vice president

___ Hospitality

___ Communication

___ PSF Rep. Coordinator

4. Phone numbers:

Home _____

Work _____

Cell _____

Address _____

5. Why did you choose Crossroads School for your family?

6. Do you fully support the mission and current vision for the schools? (If no, please explain):

7. Please briefly describe your personal gifts/strengths:

8. Which church do you attend and how often? Are you involved in any ministries there?

9. Please give a brief description of your testimony:

10. Have you ever been investigated, charged, or convicted of a crime? (If yes, please explain):

11. Please carefully read the CCS Statements of Faith and Lifestyle. Indicate your support level:

___ I fully support the statement as written, without mental reservations. I am committed to representing Crossroads School in a Christ-like manner to our families and the community.

___ I support the statement except for certain areas (please explain on a separate sheet of paper).

Signature _____ Date _____

Thank you for your interest in serving CCS. We will prayerfully consider your application and set up a time to meet with you before a decision is made.

For Office Use:

DATE RECEIVED IN OFFICE _____

RECEIVED BY _____

DATE RECEIVED BY ADMIN _____

RECEIVED BY _____

DATE RECEIVED BY PSF TEAM _____

MEETING DATE _____

DATE CONTACT WITH APPLICANT MADE _____

BY WHOM _____