

MINISTRY OF HELPS APPLICATION FORM

*As each one has received a gift,
minister it to one another...
1 Peter 4:10*



MINISTRY OF HELPS

Dear Applicant

Our role at Touch the Nations (TTN) Ministries, as part of the ministry which God has set up under apostle Ben Kleynhans, is one of utmost importance. We are here, not only supporting pillars to this house, but also to be spiritually prepared and sensitive to the leading of the Holy Spirit as we serve the body of Christ.

To enable us to function effectively and efficiently, the following requirements are laid for everyone in the ministry of helps:

1. Attend church every Sunday;
2. Attend all training sessions and meetings;
3. Spend time during week in prayer for meetings and all those in our groups;
4. Live a life that is glorifying to God in every aspect;
5. Ensure excellence in ministry by staying in line with His Word;
6. Read, understand and apply 1 Timothy 3:1-13;
7. Allow the fruit of the Spirit (Galatians 5:22, 23) to be evident in our life and ministry, as it was in the lives of Phillip and Stephen (Acts 6:3-10).

Prayerfully consider the responsibilities and commitment required from you in this ministry. Should you desire to serve in this capacity, please complete the attached MINISTRY OF HELPS APPLICATION FORM. Make sure that you have signed the COMMITMENT FORM as your agreement before God to fulfill the requirements of serving Him in this ministry.

QUALIFICATIONS:

Apart from the abovementioned requirements, we also want to emphasize the following leadership qualifications:

You must:

1. Be born again;
2. Be filled with the Holy Spirit;
3. Be either an interviewed applicant or introduced member of the TTN Family;
4. Understand and adhere to our vision, mission and core values;
5. Share the father of the house's goals and visions;
6. Submit to the father of the house and those placed in authority over you in the ministry;
7. Study and pray regularly in order to grow spiritually
8. Be an example in attire, neatness and personal hygiene.

(Please study 1 Corinthians 3:16, 17; 12:28; 1 Timothy 3:1-13; Acts 6:1-8; Isaiah 58:13, 14; Luke 16:10)



What is your personal vision?

Short term: _____

Long term: _____

State briefly why you want to become involved in the Ministry of Helps: _____

Do you play any musical instrument? Yes No

If YES, give details: _____

5. HEALTH

Indicate your general state of health: Excellent Good Fair Poor

6. EMPLOYMENT

Company name: _____ Tel No.: _____

Company address: _____

Your position in the company: _____

How long have you been with the above company? _____

How many jobs have you had in the past five years? _____

7. MARITAL STATUS

Indicate your marital status: Single
 Married When? _____
 Divorced When? _____
 Widowed When? _____

8. FAMILY INFORMATION

Spouse Title: First Name: Gender: M F

Middle Names: Surname:

Home Language: ID: Date of Birth:

Is he/she born again? Yes No When? _____

Is he/she Spirit filled? Yes No When? _____

Is he/she water baptized? Yes No When? _____

Does your spouse / family agree to you becoming involved? Yes No

Child 1 First Name: Surname: Born again? Yes No
E-mail: _____ Cellular: Gender: M F Date of Birth:

Child 2 First Name: Surname: Born again? Yes No
E-mail: _____ Cellular: Gender: M F Date of Birth:

Child 3 First Name: Surname: Born again? Yes No
E-mail: _____ Cellular: Gender: M F Date of Birth:

Child 4 First Name: Surname: Born again? Yes No
E-mail: _____ Cellular: Gender: M F Date of Birth:

