

Student Leadership

Senior High Youth

Name _____ Chinese name _____
Gender _____ Birthdate ____ / ____ / ____ Age _____ Grade ____ School _____

CONTACT INFO

Address _____ Town, Zip _____
Phone (_____) _____ Cell phone (_____) _____
E-mail address _____ Alternate e-mail _____
Webpage _____
Xanga _____ IM _____

FAMILY INFO

Mom's name _____ Dad's name _____
Mom's e-mail _____ Dad's e-mail _____
Siblings (& ages) _____

PERSONAL INFO

Closest friends in CBCGB: _____
Persons who influenced your life the most: _____
Types of personality traits that really bother you: _____
Important things to accomplish this year: _____

Skills, talents, abilities, hobbies to contribute (technology, music, drama, writing, etc.): _____

Why do you want to become a student leader this year? _____

Why do you feel you are qualified and called to serve in this capacity? _____

Please place an **X** in the box where it best describes your current condition:

Introvert	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Extrovert
Disciplined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procrastinator
Supportive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Critical
Optimistic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pessimistic
Follower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Initiator
Tolerates criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hypersensitive
Emotionally stable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Depressed
Athletically strong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physically weak
Disorganized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Organized
Non-existent faith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spiritual faith-full
Perseverant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Easily discouraged

Date/occasion of Conversion (becoming committed to Christ): _____

Date/place of Baptism: _____

Do you have a driver's license? _____

*Please note our **youth ministry driving policy**: A teen is never asked to give another teen a ride home, nor asked to drive on planned youth activities—any exception must have the permission of ALL parents involved. Parents have the ultimate responsibility to bring their child home, and same-gender counselors will help with rides whenever possible. It is currently illegal in MA for a "junior licensed operator" (has a license for 6 months or less) to drive anyone other than the immediate family member, at the allowable hours (not between 12 midnight to 5:00am). Teens must call parents in any circumstance out of the ordinary to get permission first.*