(Church Name)

Interest Form and Biblical Counselor Application

**Personal Information**

Name:

Gender:

 \_\_\_ male

 \_\_\_ female

Marital Status:

 \_\_\_ single

 \_\_\_ married

 \_\_\_ widowed

 \_\_\_ separated

 \_\_\_ divorced

Spouse:

Address:

Email:

Phone Number:

Birthday:

Employer and Position:

**Church Status**

Are you an active member of (church name)?

How long have you attended (church name)?

Have you been baptized?

 If yes, when and where?

Are you in a growth group at (church name)?

 If yes, who is your growth group leader?

Are you serving in ministry at (church name)?

 If yes, list the areas where you serve.

**Education**

Please include name of institution and dates attended.

College/Degree

Seminary/Graduate School

Please list and describe any other professional education or training you have received.

Please list any professional agencies and organizations to which you belong.

Have you completed Equipped to Counsel?

 \_\_\_ yes

 \_\_\_ no

 \_\_\_ currently enrolled

 If yes, what was the year of training?

Are you certified with ABC?

Please list other training events for biblical counseling or ministry that you have attended.

**Applicant Questions**

Briefly explain your testimony of faith.

How would you describe your current walk with God?

When you hear the term “counseling”, what comes to mind?

How would you define biblical counseling?

What are the differences, if any, between biblical counseling and psychological methods?

What are the differences between discipleship, mentoring and counseling?

What responsibility or role should the church play in helping people who need counseling?

What responsibility or role should the pastor play in helping people who need counseling?

Who is qualified to counsel other people who are struggling with problems?

What specific qualities are necessary for a person to be competent to counsel?

If you had a family member struggling with depression, who would you recommend that your family member see in order to get help? Why would you pick that person?

Explain the importance of the heart in biblical counseling.

For which of the following areas would the Word of God have sufficient answers to address and help the person to change? (check all that apply)

 \_\_\_ fear

 \_\_\_ panic attacks

\_\_\_ parenting issues

\_\_\_ depression

 \_\_\_ drug use

\_\_\_ suicidal thoughts

\_\_\_ aging

\_\_\_ self-image

 \_\_\_ alcoholism

 \_\_\_ anger

 \_\_\_ sexual sins

 \_\_\_ OCD

 \_\_\_ disordered eating

 \_\_\_ ADHD

 \_\_\_ worry

 \_\_\_ dysfunctional family

 \_\_\_ grief

 \_\_\_ marriage conflict

 \_\_\_ physical or sexual abuse

 \_\_\_ purpose/value of life

Are you involved in sinful conduct or do you have unresolved conflicts, which if known, would cause others to question the appropriateness of you being a (church name) counselor?

Have you ever been placed under church discipline?

Are you listed on the Public Sex Offender Registry?

Have you ever been convicted of a felony?

**Commitment**

Can you commit to the time needed each week to pray, prepare, counsel, and complete reports? (minimum of 3 hours per week)

Can you commit to furthering your biblical counseling education by attending monthly Equip & Encourage meetings (date and time) and additional counselor workshops and trainings (at least 2 times per year)?

I would be interested in serving as (check all that apply):

 \_\_\_ biblical counselor

 \_\_\_ intake appointment counselor

 \_\_\_ counseling group ministry leader

 \_\_\_ mentor/advocate

**Biblical Counselor Release**

I recognize that (Church Name) Biblical Counseling is relying on the accuracy of the information I provide on this Biblical Counselor Application form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.

I authorize (Church Name) Biblical Counseling to contact any person or entity listed on the Biblical Counselor Application form, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release (Church Name) Biblical Counseling and any such person or entity listed on the Biblical Counselor Application form from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation.

Should I be selected to be a biblical counselor, I agree to abide by the policies and procedures of the organization and to protect the health and safety of the counselees assigned to my care at all times.

Name

Signature

Date