
VOLUNTEER APPLICATION

FOR THOSE WORKING WITH MINORS

Church Information

Name of Church

Name of Senior Pastor

Church Address

City

State

Zip

Confidential Information

This application contains information that is confidential and may be reviewed only by the senior pastor listed above, the board of directors, or persons or committees authorized by the board of directors having authority to make personnel decisions regarding employees. Persons who review, duplicate, distribute, or disclose any portion of this document without authorization face one or more of the following consequences: (1) Possible criminal liability, (2) Possible civil liability, (3) Possible termination of employment, if an employee, (4) Possible dismissal from any official position within the Church, if a volunteer.

Applicant Information

Name of Applicant

Position Desired

Date

Please note that if the position you are applying for includes transporting minors, you may be asked to complete additional forms.

Applicant Information

First Name	Middle Name	Last Name
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Address	City	State	Zip
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Phone Number	E-mail Address
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Occupation

Are you 18 years or older? Yes No
(Parental or Guardian Consent is required if less than 18.)

Note: Conviction of a crime and/or answering yes to any of the following questions may not necessarily disqualify you for a position as an employee.

Have you ever been convicted of, pled guilty or no contest to a crime other than a minor traffic violation? Yes No
If yes, please explain, including the name of the crime(s), the date and disposition of the case(s):

Are you presently facing charges for any criminal offense? Yes No
If yes, please explain:

Have you ever been accused of or charged with any offense involving children? Yes No
If yes, please explain, including disposition or current status of the charge:

Church Involvement

Have you ever interviewed to be a volunteer at the Church listed above prior to today's date? Yes No
If yes, please give the date(s) and interviewers name:

Are you currently a member of a church? Yes No

If yes, please provide the following:

Church Name _____

Name of Pastor _____

Address _____ City _____ State _____ Zip _____

Years Attended _____

Education

Please check last grade completed: 8 9 10 11 12 GED

Years of College: 1 2 3 4

Years of Graduate School: 1 2 3 4

References

Please list three (3) personal references. Your references must have the ability to assess your suitability for working with or around minors. Two (2) references must be members of this Church; one (1) reference should be from a current or past position in which you volunteered or worked with children from someone who works with children on a regular basis.

Please do not include relatives.

Reference One

Name _____

Relationship to You _____

Address _____ City _____ State _____ Zip _____

Phone Number _____

E-mail Address _____

Reference Two

Name _____

Relationship to You _____

Address _____ City _____ State _____ Zip _____

Phone Number _____

E-mail Address _____

Reference Three

Name _____

Relationship to You _____

Address _____ City _____ State _____ Zip _____

Phone Number

E-mail Address

Experience Working with Children

Please list up to three of your previous experiences where you worked with children beginning with your current or most recent.

Note: If you have less than three prior experiences, please list all that you have.

If you have no prior experience, please state “none” here: ____

Previous Experience One

Church/Organization Name

Position

Address

City

State

Zip

Start Date/Ending Date (Month/Year)

Supervisor Name & Title

Supervisor Phone Number

Reason for Leaving

Description of Duties:

Previous Experience Two

Church/Organization Name

Position

Address

City

State

Zip

Start Date/Ending Date (Month/Year)

Supervisor Name & Title

Supervisor Phone Number

Reason for Leaving

Description of Duties:

Previous Experience Three

Church/Organization Name	Position		
Address	City	State	Zip
Start Date/Ending Date (Month/Year)			
Supervisor Name & Title		Supervisor Phone Number	

Reason for Leaving

Description of Duties:

Please write a brief statement explaining why you are seeking a volunteer position with this Church and describe why you want to work with children and would make a good volunteer for this Church.

Volunteer Agreement

In completing this Volunteer Application, I understand, represent and agree that:

Acceptance of this completed Application by the Church listed below does not mean that a volunteer position for which I am qualified, is open or that the Church has agreed to allow me to volunteer. Church is under no obligation to utilize my services as the result of accepting this completed application.

As part of the Church's procedure for verifying the information provided by me on this form or evaluating me for volunteer purposes, the Church may contact persons, employers and/or organizations named by me in this form; conduct a national criminal background check; conduct a sex offender registry check; a social security trace or other appropriate background investigative reports which may include information gathered through personal interviews with third parties, family members, and persons, with whom I am acquainted. I consent to the Church making such checks and understand that this may include information regarding my character, general reputation, and personal characteristics. I further agree to sign any and all documents, consents and/or agreements which may be necessary for the Church and its authorized representatives and/or designees to complete the above.

By signing this form, I authorize Church to request and obtain the information described above. Further, I release Church and its denominational agency, affiliates, related entities, agents, employees, and officers (collectively "Church") and all references from any claim or liability whatsoever arising out of such request or any information disclosed in response thereto, and I agree to hold the Church and all references harmless and will not to bring any action or assert any claim against the Church or any reference on account thereof.

I understand that my providing of false or misleading material information or my failure to state material facts either in this form or in any interview will result in the immediate rejection of my application as a volunteer with or immediate dismissal if such false or misleading information is discovered after any volunteer offer is accepted by me from the Church listed above.

I have read and understand the above and affirm that the information I have provided on this application is true and correct.

Name of Church

Printed Name of Applicant

Signature of Applicant

Date

Note: A photocopy or facsimile of this authorization shall be as valid as the original.

To be completed by the Church.

Name of Church

Name of Applicant

Name of Person Completing Referencing

Signature of Person Completing Referencing

Current/Last Church or Organization

Name

Referencing Method

Written Reference Form Returned? Yes No

Phone Interview Form Completed? Yes No

Past Church or Organization

Name

Referencing Method

Written Reference Form Returned? Yes No

Phone Interview Form Completed? Yes No

Past Church or Organization

Name

Written Reference Form Returned? Yes No

Referencing Method

Phone Interview Form Completed? Yes No

Personal Reference

Name

Written Reference Form Returned? Yes No

Referencing Method

Phone Interview Form Completed? Yes No

Personal Reference

Name

Written Reference Form Returned? Yes No

Referencing Method

Phone Interview Form Completed? Yes No

Personal Reference

Name

Written Reference Form Returned? Yes No

Referencing Method

Phone Interview Form Completed? Yes No

Background Screening Check

Name of Person Requesting Background Screening Check

Date Requested

Date Returned