



Family in Christ

COMMUNITY CHURCH

Children/Youth Work Application VOLUNTEERS AND EMPLOYEES

Personal (Please Print)

Full Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Phone: _____ Cell Home

Email: _____ Social Security #: _____

Driver's License #: _____ State of License: _____

Maiden name or other names used: _____

In which children/youth program(s) are you seeking to become involved? _____

What other children/youth work experience do you have? *(Please List)*

Organization	Program	Dates	Contact
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you at any time ever:

- Been arrested for any reason? Yes No
- Been convicted of, or pleaded no contest to, any crime? Yes No
- Engaged in, or been accused of, any child molestation, exploitation, or abuse? Yes No

Are you aware of:

- Having any traits or tendencies that could pose any threat to children, youth, or others? Yes No
- Any reason why you should not work with children, youth, or others? Yes No

If the answer to any of these questions is "yes," please explain in detail: _____

(Please attach additional pages if more space is needed)

(over)

Church Activity (Please Print)

What church or churches have you attended in the past five years?

Church Name	Pastor's Name	Years Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

References – Other than relatives (Please Print)

Name/Relationship	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant Verification and Release

I recognize that the organization to which this application is being submitted is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I authorize the organization to contact any person or entity listed in this application, 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 the organization and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.

I have carefully read the policy and procedures of the organization, and I agree to abide by them and to protect the health and safety of the children or youth at all times.

Printed name: _____

Signature: _____ **Date:** _____