

Volunteer/Staff Application

Confidential

Page 1 of 4

This application is to be completed by all applicants for any volunteer or compensated position involving the supervision, exposure to or custody of minors or volunteering as peers with minors. This is not an employment application. Persons seeking a position in the church as paid employees will be required to complete an employment application in addition to this screening form. Thank you for helping our church provide a safe and secure environment for children and youth who participate in our programs and use our facilities.

Check ministry area: Nursery/Preschool Elementary Middle School High School _____

Basic Information

Legal Name _____
First MI Last

Address _____
Street Address City State Zip

Phone numbers _____
Home Work Cell

Best times to reach me at home are _____ May we call you at work? Yes No

Employer _____ Employer address _____

Position at work _____ Years at current job _____

Email _____ Driver's License _____

Church membership: Member Regular attendee

How long have you attended our church? _____

Emergency contact _____ Phone _____
Name and relationship

Family Information (optional)

Marital status (circle one): Single Married (anniversary date _____) Divorced

If married, spouse's name _____

If you have children, their names and ages:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Education

High school	City	State	Grad year
College/technical school	City	State	Grad year
Degree and major		Minor	
Other education, training, and licenses			

Ministry or Volunteer Experience (list most recent first)

Church (name, city, state, and zip)	Dates	Area of service	Contact person	Phone
1.				
2.				
3.				

Tell Us About Yourself

1. When and how did you become a Christian?

2. What have you been doing to grow spiritually in the past year?

References

Please provide two character references (other than family members) who can identify your strengths and weaknesses and describe your background.

1.	Name	Address	Home/Work phone	Relationship
2.	Name	Address	Home/Work phone	Relationship

Background information

Have you, at any time, been involved in or accused, rightly or wrongly, of sexual abuse, maltreatment, inappropriate touch or neglect?

yes no

Have you ever been accused or convicted of possession/sales of controlled substances, driving under the influence of alcohol or drugs, or possession of child pornography?

yes no

Are you using illegal drugs or prescription drugs inappropriately?

yes no

Have you been arrested or convicted for any criminal act more serious than a traffic violation?

yes no

Have you ever been involved romantically or sexually with any student in ministry, or had sexual contact with any minor after you became an adult?

yes no

Have you ever been a victim of any form of child abuse?

yes no

If yes, would you like to speak to a counselor or pastor?

yes no

Have you ever gone through treatment for alcohol or drug abuse, or other addiction?

yes no

Have you ever been asked to step away from volunteering, ministry or work with students or children in any setting, paid or volunteer?

yes no

Is there anything in your past or current life that might be a concern if we found out about it later?

yes no

If the answer to any of the above questions is yes, please attach another page and write a full explanation. These will be discussed with you confidentially.

Waiver / Release

I, the undersigned, give my authorization to Christ Community Church of San Diego representatives (hereafter referred to as The Church) to verify the information on this form. The Church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a church youth ministry worker. I am willing to request and submit to The Church background reports on myself from the (state) Department of Social Services central registry.

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for student ministry. In consideration of the receipt and evaluation of this application by The Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that may at any time result to me, my heirs, or family, because of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the constitution, statement of faith and policies of The Church, and to refrain from conduct unbecoming to Christ in the performance of my services on behalf of The Church. If I violate these guidelines, I understand that my volunteer status may be terminated. By signing this application, I state that all of the information given about myself is true.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN ACT. This is a legally binding agreement which I have read and understand.

Print name

Signature

Witness

Date