



## Ministry Personnel Application Form (Adults) for Children, Youth and Vulnerable Adults Ministries

In our desire to reduce the risk of abuse within our church ministries, we believe this information is necessary to protect our Children, Youth and our Volunteers and to effectively place our Volunteers in ministry positions. Thank you in advance for your partnership.

### Personal Information

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_ Email \_\_\_\_\_

Phone Number (H) \_\_\_\_\_ (W) \_\_\_\_\_

### Personal History

Occupation and/or Employer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hobbies, Interests or Skills

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Spiritual History**

How long have you attended Morrisburg Pentecostal Tabernacle? \_\_\_\_\_

Do you regularly attend (2 or more services a month)?  Yes  No

Are you a member of the Morrisburg Pentecostal Tabernacle?  Yes  No

Have you been baptized?  Yes  No

If not, are you willing to attend a baptismal class?  Yes  No

In a brief paragraph, please outline your spiritual journey (how you came to know Christ as Saviour and what you are currently doing to grow in your relationship with Him).

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List any gifts, training, education or other qualifications that have prepared you to minister with Children, Youth and Vulnerable Adults.

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**Ministry Information**

Churches I attended in the last five years are as follows:

1. Name of Church \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Dates Attended \_\_\_\_\_ Member or Adherent \_\_\_\_\_

2. Name of Church \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Dates Attended \_\_\_\_\_ Member or Adherent \_\_\_\_\_

My present and previous ministry experience is as follows:

1. Name of Church/Organization \_\_\_\_\_

Dates and Description of Ministry \_\_\_\_\_

Pastor or Ministry Supervisor \_\_\_\_\_ Phone # \_\_\_\_\_

2. Name of Church/Organization \_\_\_\_\_

Dates and Description of Ministry \_\_\_\_\_

Pastor or Ministry Supervisor \_\_\_\_\_ Phone # \_\_\_\_\_

### Confidential Information

In order to provide a safe and secure environment for our Children, Youth and Vulnerable Adults, we believe it is necessary to include the following questions as part of our application process. All information will be kept confidential by church leadership and the Plan to Protect® team. (Police may access this information, under warrant, if requested.) Answering yes to any of the questions may not necessarily preclude your involvement in ministry. Thank you in advance for your understanding.

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|--|------------------------------|-----------------------------|
| 1. Are there any circumstances involving your lifestyle or background that would call into question your ability to work with Children, Youth and Vulnerable Adults? (e.g. pornography, use of illegal substances, etc.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Have you ever been accused of impropriety with Children, Youth and Vulnerable Adults?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Have you ever been convicted for the use or sale of illegal drugs?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Have you ever been through treatment for alcohol or substance abuse?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Have you ever been convicted of a criminal offense (excluding minor traffic violations)?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Have you ever been arrested or convicted for any abuse related crimes?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Have you been investigated by the Child Welfare Agency for suspected child abuse?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Have you ever been the subject of a civil lawsuit involving sexual harassment or other immoral behaviour or conduct involving Children, Youth or Vulnerable Adults?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Appendix 1

- 9. Have you ever been the subject of any disciplinary action, transfer or dismissal, or been named as a defendant in a civil or criminal lawsuit as a result of an accident or mishap involving Children, Youth and Vulnerable Adults?  Yes  No
- 10. Have you ever been subjected to expulsion, reprimand, or other discipline by a church, denomination or other religious organization?  Yes  No
- 11. Have you ever been the subject of any disciplinary action (including discharge) or investigation by a church, religious or other organization, or by an employer?  Yes  No
- 12. Do you have any health concerns of which we should be aware? (e.g. medical, psychiatric)  Yes  No

If you have answered yes to any of the above questions, please explain.

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**References**

Please provide the names of three individuals, excluding relatives, who could provide a reference for you. Include at least one reference from outside the church.

1. Name of Reference \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Nature of Relationship \_\_\_\_\_

2. Name of Reference \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Nature of Relationship \_\_\_\_\_

3. Name of Reference \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Nature of Relationship \_\_\_\_\_