

Grace Covenant Church

Volunteer Application for Work in Children’s Ministry & Information Verification and Background Check Authorization

This application is a confidential, mandatory part of a process to help the church provide a safe, nurturing environment for our children and youth. Persons responsible for the supervision and care of our children are in a special position of trust and confidence. Therefore, persons who work with children must be covenant members of Grace Covenant Church and complete this application.

Full Name: _____

Place a checkmark or an X in the YES or NO box as appropriate.	YES	NO
1 Are you 18 years or older?		
2 Have you ever been convicted or charged with any criminal offense (excluding parking tickets)?		
3 Have you pleaded guilty or no contest to any criminal offense?		
4 Have you ever been charged with or convicted of child neglect or physical / sexual abuse involving children or adults?		
5 Have you pleaded guilty or no contest to any neglect or abuse offense?		
6 Have complaints or allegations of misconduct involving children ever been made against you?		
7 Have you ever left or been asked to leave a volunteer or paid position because of charges of sexual harassment or sexual misconduct?		
8 Have you ever left or been asked to leave a volunteer or paid position because of viewing child pornography?		

If Answer Is Yes for Questions 2-8, Please Explain (use back of page if necessary):

Verification of Information

I certify that the information I have provided is true and correct. If it is found that the answers given are untrue, I understand it may be grounds for disqualification for volunteer service.

I authorize Grace Covenant Church to solicit background information relative to my criminal record history. I understand that Grace Covenant Church may make inquiries into my background that may include motor vehicle records, personal references, criminal records, and any other public record reports pertaining to me.

I authorize, without any reservation, any person, agency, or other entity contacted Grace Covenant Church, or their agent, for purposes of obtaining background report information to furnish the above-mentioned information.

I release Grace Covenant Church, their respective employees, or agents, and employees of their agents and all persons, agencies and entities providing information or reports about me from any and all liability arising out of furnishing any such information.

I understand that Grace Covenant Church uses an online background check service. I am aware that one of the Elders will email a link (with login information) to this service. I am aware that once logged in, I must enter personal identifying information. I understand that, at a minimum, I must provide my social security number. I am aware that other information, such as driver's license, may be required. I further understand that failure to enter this information will prevent the background check from occurring, and will preclude me from working in the Children's Ministry.

I am aware that if I choose, I may obtain a complete disclosure of the nature and scope of any report prepared about me if I make a written request to Grace Covenant Church within a reasonable time after I execute this authorization. I understand that a photocopy or facsimile of this signed document shall be considered as valid as an original.

Please Print		
First Name:	Middle Name:	Last Name:
Other Name(s) Used:		
Last four digits of your Social Security Number: XXX-XX- _____		Date of Birth:
Current Address		
Street Address:	City:	State and Zip:
How long at this address? Years/Months:		
Previous Address		
Street Address:	City:	State and Zip:
How long at this address? Years/Months:		
Printed Name:	Signature:	Date:

Church Use Only in This Box

Applicant First and Last Name: _____

Date Received ___ Application Reviewed By _____

Background Check Reviewed By _____

CPP Training Completed and Acceptance Form Received _____

Approved By: _____