

**SALEM BAPTIST CHURCH
CHILDREN'S MINISTRY VOLUNTEER APPLICATION
AND BACKGROUND CHECK AUTHORIZATION**

This application must be completed by all volunteers for any position involving the supervision of children.

Date of Application: _____ / _____ / _____

Applicant's Full Name (Please Print) _____

Former Names (Aliases), and Dates Used _____

Date of Birth _____ / _____ / _____ Social Security Number _____ - _____ - _____

Driver's License Number/State _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address from _____
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address from _____
(Mo/Yr) (Street) (City) (State/Zip)

Home Phone (_____) _____ - _____ Cell Phone (_____) _____ - _____

Work Phone (_____) _____ - _____ Email Address _____

Marital Status (check one): Married Single Separated
 Divorced Widowed Engaged

Are you a member of Salem Baptist Church? Yes No If yes, date joined: _____ / _____
(Month) (Year)

If no, how long have you attended? _____

Please list the name and address of other churches you have attended regularly during the past five years.

_____ Member? Yes No

_____ Member? Yes No

Other Salem Baptist activities (current and previous): _____

Do you have any physical handicaps or conditions preventing you from performing certain types of activities relating to youth or children's ministry? Yes No

If yes, please explain: _____

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Applicant's Full Name _____

Have you ever been convicted of any crime, including sex-related or child-abuse related offenses?

____ Yes ____ No

If yes, please explain: _____

Please list all previous work involving children (identify organization and type of work):

Please list any gifts, callings, training, education, or other factors that have prepared you for ministry to children:

PERSONAL REFERENCES

Please provide names and contact information for two **non-relatives** who are familiar with your character as it relates to working with children:

Name: _____ Name: _____

Address: _____ Address: _____

City, St., Zip: _____ City, St., Zip: _____

Email: _____ Email: _____

Telephone: _____ Telephone: _____

Members of less than 6 months and non-members, please additionally provide the names of two **members of the congregation** who will provide recommendations:

Name: _____ Name: _____

Address: _____ Address: _____

City, St., Zip: _____ City, St., Zip: _____

Email: _____ Email: _____

Telephone: _____ Telephone: _____

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Applicant's Full Name _____

APPLICANT STATEMENT/BACKGROUND CHECK AUTHORIZATION:

The information contained in this application is correct to the best of my knowledge. I hereby authorize any reference or organization listed in this application to provide any and all information they may have that may relate to my character and fitness for ministry leadership. I release such personnel and agencies from liability for any damage that may result from furnishing such evaluations, and I waive any right that I may have to inspect reference information provided.

I also authorize Salem Baptist Church and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history; character references; drug testing; civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to Salem Baptist Church or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

Should my application be accepted, I agree to be bound by the policies of Salem Baptist Church, and to refrain from unscriptural conduct in the performances of my services on behalf of the church. I acknowledge that these policies and applications do not constitute a contract between the church and myself, and that Salem Baptist Church is not responsible for the individual wrongful acts of any worker.

Applicant's Signature _____ Date _____

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