

Application to Serve in Parkway's Children or Student Ministry

This application is to be completed by all adults (18 and up) seeking a volunteer position involving the supervision or custody of minors. This is not an employment application. This form is part of our process for ensuring the church provides a safe and secure environment for children who participate in our ministry programs.

Name: _____ Date: _____
(First) (Middle) (Last)

Present Address: _____

City: _____ State: _____ Zip: _____

Telephone(Day) _____ (Cell) _____ e-mail: _____

Sex: M F Date of Birth (mm/dd/yy): _____ Place of Birth: _____

Years in TX? ____ If less than 3 years, prior address: _____

Is there any circumstance or pattern in your life which would make it inappropriate for you to serve with minors or that would compromise the integrity of the Children or Student Ministry of Parkway UMC? __no __yes, explain:

Character References:

Please list other organizations where you currently (or have in the recent past) volunteered or worked with children or youth, including a contact name with email/phone number; alternatively you can list non-family adults who can attest to your character:

Organization: _____ Organization: _____

Position Held There: _____ Position Held There: _____

Name: _____ Name: _____

Email: _____ Email: _____

Telephone: _____ Telephone: _____

I affirm to the best of my knowledge that the information on this form is correct. I hereby release any organization or individual from any liability from any damages that I may incur. I understand this form and background check will be renewed each year.

Signature: _____ Date: _____

I give Parkway UMC permission to do a criminal background check. ____ (initialing signifies yes)

As a volunteer, I agree to observe all church policies regarding working with children or youth. ____ (initialing signifies yes)