



VOLUNTEER APPLICATION (Ages 16+)

We appreciate and value your interest in Children’s Ministry. The personal, specific content of this application provides the precautions necessary to assure parents, children and volunteers of the safest possible environment. We respect the confidential information contained in this application.

In processing this application, you will need an annual police background check. The police check is done through the church at no cost to you.

GENERAL INFORMATION

Date of application: _____

Full Name (first) _____ (middle) _____ (last) _____ (Spouse's Name) _____

Name you go by _____ Date of Birth _____ Home Phone _____ Cell Phone _____

Address _____ Postal Code _____

Email address: _____

Do you have any medical training or are you CPR certified? Yes No

EMPLOYMENT

Present Employer _____ Your Position _____

Phone _____ Full or Part Time _____ Length of Employment _____

PERSONAL REFERENCE

List two people you've known for at least one year, who are not related to you but have a definite knowledge of your character.

1. _____
Name _____ Phone _____ Relationship (Friend, co-worker) _____ Length of Time _____

2. _____
Name _____ Phone _____ Relationship (Friend, co-worker) _____ Length of Time _____

PERSONAL INFORMATION

Why would you like to serve in Kids Ministry?

Tell us about your personal story of spiritual growth and church experience. Do you consider yourself to be a committed follower of Jesus Christ?

How long have you been attending Elim? _____

Are you presently involved in any other area of ministry at Elim? If so, which one(s)?

Indicate churches that you have attended in the last five years:

1. Name of Church _____ Phone Number _____
Address _____
Dates Attended _____

2. Name of Church _____ Phone Number _____
Address _____
Dates Attended _____

Do you have children of your own? _____
(Names) (Ages)

Do you have any experience working with Children?
Role(s) When Facility/Organization

Have you ever been convicted of any offence against the law? (other than minor traffic violations) If yes, please explain.

Have you ever been accused, charged or convicted of any act of neglect, abuse or molestation of a child?
If yes, please explain. _____

Have you ever been a victim of childhood sexual or physical abuse? _____

Are there any medical circumstances (i.e. physical, psychiatric, communicable disease-ie/HIV or Hep) that would affect your ability to serve in any area of Children's Ministry? _____

MINISTRY COVENANT

1. I have confessed Jesus Christ as personal Saviour and am now living as a committed follower of Christ. I faithfully attend church services.
2. **I acknowledge that being a part of a team means that my faithful attendance, preparation and punctuality is important to everyone; therefore, I will call my ministry leader at least 2 days prior if I will be absent or tardy.**
3. I acknowledge that from time to time I may be privy to personal family affairs and accept that I am not to disclose any private information to anyone other than to fellow workers to whom such disclosure would be important for the health and safety to the child(ren) involved.
4. I have read this page and will abide by the leadership standards and I acknowledge that the application information I have filled out is correct to the best of my knowledge.

Printed Name: _____

Signature: _____ Date: _____