

Safe Sanctuaries Adult Volunteer Application

Name _____ Area of Ministry _____

Address _____ Preferred Phone _____ (text?) _____

_____ Alt Phone _____ (text?) _____

Preferred Email _____

Please check all of the following that apply:

_____ I am at least nineteen (19) years of age

_____ I am under 19, my current age is _____

_____ I have been actively affiliated with GSUMC since _____

_____ I have previous experience working with children, youth or vulnerable adults (not required)

_____ Other than minor traffic violations, I have never been convicted or plead guilty/no contest to a criminal offense

_____ I completed GSUMC Safe Sanctuaries training on this date _____

Please list two (2) adult members of the Gulf Shores United Methodist Church who know you well:

_____ Phone _____

_____ Phone _____

This application shall be completed prior to volunteering with children, youth or vulnerable adults at GSUMC. A completed Authorization to request and run Background Check form shall accompany this application if a background check has not been completed within the last two (2) years. GSUMC Safe Sanctuaries Policy requires a criminal background check be performed on all volunteers working with children, youth or vulnerable adults. In addition, all volunteers are required to attend a Safe Sanctuaries Policy training event annually and sign the Safe Sanctuaries Covenant Statement form.

The information on this form is correct to the best of my knowledge.

_____ Date _____
Printed Full Name of Volunteer

Signature of Volunteer