

## Infant/Child/Youth Worker Application Form

It is the goal of SUGAR LAND BIBLE CHURCH (SLBC) to create a safe and secure environment for all children who participate in activities of this church. To facilitate this goal, certain essential information from individuals offering volunteer services to our children and youth must be collected. This information will be used for the sole purpose of helping the church provide a safe and secure environment for the children who participate in our programs and use our facilities and will be kept in a secure location at all times.

### Personal Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (Month / Day / Year)

Address: \_\_\_\_\_

Phone #: Home: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_ Other: ( ) \_\_\_\_\_

*Please answer all questions that are particularly applicable to the position you are applying for.*

1. Please state the position or type of youth/child work you are applying for: \_\_\_\_\_

\_\_\_\_\_

2. When are you available to work? \_\_\_\_\_

3. What is the minimum length of time commitment you can make? \_\_\_\_\_

4. If the position you are applying for will involve driving children/youths to activities off the church campus, you must have a valid driver's license.

Please provide your driver's license #: \_\_\_\_\_

5. Name and address of current employer \_\_\_\_\_

How long have you been employed there? \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

6. Do you have any training/certification in first aid or CPR? \_\_\_\_\_

7. Is there any reason why you should not work with children or youth? \_\_\_\_\_

Please Comment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Have you ever been the subject of a child abuse investigation? \_\_\_\_\_

If yes, was the allegation substantiated? \_\_\_\_\_

Please comment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Have you ever been abused? \_\_\_\_\_ If yes, was it reported? \_\_\_\_\_

Please comment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*The Leadership of Sugar Land Bible Church appreciates that the issue of abuse can be both a sensitive and painful subject for those who have been victimized. The main objective in asking this question is to provide an opportunity for the victim of abuse to find sound, biblically based, help if so desired. Moreover, answering yes or leaving question #9 unanswered **will not** automatically disqualify an applicant for work with children or youth.*

Would you like to talk with staff about counseling? \_\_\_\_\_

10. Have you ever been convicted of or pleaded guilty to a criminal offense against a person? \_\_\_\_\_

If yes, please comment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Church History and Prior Experience

1. What is your church affiliation, if any? \_\_\_\_\_

2. How long have you been a member of that church? \_\_\_\_\_ (years/months)

3. List any other churches where you may have previously been a member or attended on a regular basis:

\_\_\_\_\_

\_\_\_\_\_

4. Have you ever been a child/youth worker or volunteer before? \_\_\_\_\_

If yes, when and in what capacity? \_\_\_\_\_

5. List all other childcare, teaching, or other child/youth work you have been involved in on either a paid

or volunteer basis: \_\_\_\_\_

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6. Please share why you have chosen to apply for this position, and any other factors that you believe prepare you for this position: \_\_\_\_\_

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### References

At least one of these references should be an SLBC member who knows of your work with youth or children.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

### **Infant/Child/Youth Worker Statement**

The information contained in this application is accurate to the best of my knowledge. I authorize any references or churches listed in this application to give you any information that they may have regarding my character and fitness for children or youth work. In consideration of the receipt and evaluation of this application by SUGAR LAND BIBLE CHURCH (SLBC), I hereby release any individual, church, youth organization, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of any kind or nature which may at anytime result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization.

Should my application be accepted, I agree to be bound by the policies of SLBC and to refrain from prohibited behaviors in the performance of my services on behalf of the church.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THE RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and understand.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_