

# Zion Baptist Church

## Child Worker Applicant Screening Form And Release for Background Checks

This screening form is to be completed by all those who will be working with children and youth in compliance to the Zion Baptist Church (ZBC) Child Protection Policy – April 2014

### Personal Information

Name \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_

City State Zip Telephone # \_\_\_\_\_

*If explanatory notes are needed, please attach a separate sheet and number to correspond with question.*

1. Please indicate the type of youth or children's work you prefer: \_\_\_\_\_

2. Have you ever been convicted of a crime? \_\_\_\_\_ No  
\_\_\_\_\_ Yes (If yes, please explain) \_\_\_\_\_

3. Do you have a current driver's license? \_\_\_\_\_ No  
\_\_\_\_\_ Yes (If yes, please give your driver's license number, date of birth and state of issue):  
\_\_\_\_\_

4. Have you had a criminal record background check conducted before? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, for what and by whom was it conducted?  
\_\_\_\_\_

### Church History and Prior Youth Work

5. Name of church of which you are a member \_\_\_\_\_

6. List (name and address) other churches you have attended regularly during the past five years  
CHURCH NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CHURCH NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

7. List previous church ministry involvement with youth and children during the past 7 years (list each church name and address if not ZBC, type of work, and dates if possible):  
\_\_\_\_\_  
\_\_\_\_\_

8. List previous non-church involvement with youth during the past 7 years (list each organization name and address, type of work performed, and dates): \_\_\_\_\_  
\_\_\_\_\_

9. List any gifts, callings, training, education or other factors that have prepared you for children's ministries:  
\_\_\_\_\_

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10. Personal references if a member of ZBC less than 2 years.

NAME \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

**APPLICANT STATEMENT**

(Read and Sign Below)

I certify that this volunteer application was completed by me and that all of the information on this application is true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts called for herein will result in my disqualification from further consideration as a volunteer. I understand that this volunteer application is not valid without my signature.

Print Name	
Signature & Date	
Witness & Date	

# AUTHORIZATION AND REQUEST FOR CRIMINAL RECORDS VERIFICATION AND FINGERPRINT INFORMATION

I, \_\_\_\_\_, hereby authorize Zion Baptist Church to obtain and/or request information about my criminal history and fingerprints from any entity chosen specifically for conducting this search, to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by city, county, state, and federal law. I do release said entities from all liability that may result from any such disclosure made in response to this request. I may revoke this request at any time, but that revocation must be in writing and give 30 days' notice of same.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Last)	(First)	(Middle)	
Address	City	State	ZIP Code
Other names used by applicant (if any):			
Date of Birth	Place of Birth	Social Security Number	
Driver's License No.	Issuing State	License expiration date	