

Primary Screening Form For Children Or Youth Work

Confidential

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors. This is not an employment application form. Persons seeking a position in the church as a paid employee will be required to complete an employment application in addition to this screening form. It is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

Personal

Date: _____

Name: _____
Last First Middle

Identity must be confirmed with a state drivers license or other photographic identification.

Present address: _____

City: _____

State: _____ Zip: _____ Home Phone () _____

Daytime phone if different than home: () _____

How long have you attended this church (if less than one year please indicate number of months)?

_____ years _____ months

Are you a member of this church?

_____ Yes - If yes, please indicate how long you have been a member: _____ years _____ months

_____ No

Name of church of which you are a member: _____

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1. Are you 18 years of age or older? _____ Yes _____ No
2. Have you ever been convicted of, or pled guilty or no contest to a crime other than a minor traffic violation, or are you now under charges for any criminal offense? A criminal conviction will not necessarily disqualify you from consideration.

_____ Yes (if yes, please list the question number and explain fully on an additional sheet)

_____ No

Training, Experience, Professional Certification, or Licenses

3. List any additional training or experience you have had that qualifies you for the position you are seeking, including any professional license or certification. Use the page 4 to write any additional comments that you would like to make about your background.

4. List churches (name and address) you have attended regularly during the past five years:

In what capacity did you offer your services as a volunteer?

In what capacity do you desire to offer your services as a volunteer within our church?

References From Our Church

5. List below two personal references within our church who are well acquainted with you. Do not list relatives.

A. _____

B. _____

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Volunteer's Statement - Read Carefully!

In consideration of the receipt and evaluation of this application by the church, I agree and represent that:

- The information contained in this application is correct to the best of my knowledge.
- I authorize any references, or any other person or organization, whether or not identified in this application, to give you any information (including opinions) regarding my character and fitness for volunteer service. I hereby release any individual, church, denominational agency or official, reference, or any other person or organization, including record custodians, both collectively and individually, and whether or not identified in this application, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, or account of compliance or any attempts to comply with this authorization, excepting only the communication of knowingly false information. I further state that *I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act.* This is a legally binding release which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of this authorization shall be as valid as the original. I further understand that a criminal records check may be conducted on me, and I consent to any such check.

I (check one of the following two options):

waive
 do not waive

any right that I may have to inspect any information provided about me by any person or organization described above.

I have read and understand the above provisions, and agree to them.

Signature

Date

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Use this page to make any additional comments.

Signature

Date

Social Security Number

For Chapel Use Only

Interviewer Comments

Date of Acceptance _____

Signature of Interviewer _____