CHILDREN'S MINISTRY VOLUNTEER APPLICATION

This confidential application is to be completed by all serving in any volunteer position involving children at Community Church. It is being used to help the church provide a safe and secure environment for those children who participate in our programs.



□Yes □No

TELL US ABOUT YOURSELF Name:______Spouse Name:_____ Date of Birth:______Social Security #:_____ Address:______City:_____State:____Zip:_____ Phone:(mobile)_____(work)_____ _____ _ Occupation: _____ Are there any physical handicaps or conditions preventing you from performing certain types of activities with children?_____ SPIRITUAL HISTORY Have you accepted Jesus as your Lord and Savior? ☐ Yes ☐ No If no, please explain below. If yes, how are you growing in your relationship with Christ? CHURCH AND MINISTRY BACKGROUND Do you regularly attend our weekend services? Yes No If yes, since when? Summarize the history of your ministry involvement at Community Church: ______ What previous ministries or work have you been involved in, especially related to children? What special talents, education or skills do you have which you believe would be valuable in Children's Ministry? ____ Are you currently CPR Certified? ☐ Yes ☐ No Are you currently First Aid Certified? ☐ Yes ☐ No Have you ever been denied the opportunity to work with children at a church, institution, or any other setting? ☐ Yes ☐ No

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a child? ☐ Yes ☐ No

Have you ever been convicted of a criminal offense, including the illegal use or sale of drugs?

Interested Volunteer Role What area are you interested in serving? (check all that apply) ☐ 4th-6th ☐ Nurserv □ PreK \square 2nd-3rd Grade Grade Age 0-2 Grade Girls Grade ☐ Small Group ☐ Large Group Storyteller/Host ☐ Greeter/ □ General ☐ 4th_6th Check in Support Support Grade Boys Why have you chosen to work with children in our church? Personal References Please provide two references (other than family members) who can identify your strengths and weaknesses and describe your background. _____Phone: _____ Reference Name: Email: ____ How long have you known this person? _____ _____Phone: _____ Reference Name: _____ Email: _____ How long have you known this person? _____ **Applicant's Statement** • Iwill pursue an authentic relationship with God through devotional Bible reading and fellowship with other Christians. • I will pray regularly for the children for whom I am responsible I will cooperate in a spirit of unity and loving support with the Children's Ministry Director and other volunteers • I will arrive at my place of ministry on time and be well-prepared, striving to present God's Word clearly • I will provide a fun and safe environment for the children whom I minister • I will make every effort to attend all volunteer meetings and classes offered The information contained in this application is correct to the best of my knowledge. I authorize any references or other organizations listed in this application to give you any information they may have regarding my character and fitness for Children's Ministry, and I release all such references from liability for any damage that may result from furnishing such evaluations to you. I understand that personal information will be held confidential by the church staff. ☐ I have received and read the family protection policy and I agree to abide by all policies

Thank you for completing this application! Please return it the church office or give it to the Children's Ministry Director.

For Staff Use Only
Interviewed By:
References Checked By:
Background Check Completed: Y/N