

Grace Church-Children's/Youth Ministries
Adult Application Form

Confidential

Thank you for your interest in Children's and Youth Ministries at Grace Church. This application is to be completed by adult applicants for all volunteer and compensated positions involving supervision and custody of minors. The information contained in this application will be kept confidential and disclosed only to those who have a genuine need to know in order to carry out their responsibilities at or for Grace Church, or as required by law. ***Please return your completed application to the church using the stamped, addressed envelope enclosed in your application packet.***

General Information

Date _____

Name _____
 first middle last

Maiden Name (or other name you are known by) _____

Spouse's Name (if applicable) _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Number of years at this address _____

E-mail address _____

Date of Birth _____ Place of Birth _____

Social Security # _____

Driver's License # _____ State _____

Previous Addresses

If applicable, provide any additional addresses where you have resided in the past **five** years.

Address _____

City _____ State _____ Zip _____

Address _____

City _____ State _____ Zip _____

Address _____

City _____ State _____ Zip _____

Education

High School _____ Attended From _____ to _____
Trade/Vocational School _____ Attended From _____ to _____
College _____ Attended From _____ to _____
College _____ Attended From _____ to _____

Employment

Present Employer _____
Date of Employment _____ Phone () _____
 month year
Address _____
City _____ State _____ Zip _____
Position _____ Supervisor _____
Job Description _____

Provide information for all other jobs you have held in the last **five years**, if applicable.

Employer _____ Phone () _____
Address _____
City _____ State _____ Zip _____
Employment Period _____ to _____
 month year month year
Position _____ Supervisor _____

Employer _____ Phone () _____
Address _____
City _____ State _____ Zip _____
Employment Period _____ to _____
 month year month year
Position _____ Supervisor _____

Spiritual Journey

Have you personally received Jesus Christ as your Savior? yes no unsure
If yes, please summarize how you came to know Him as your Savior.

What do you do on a consistent basis to grow in your relationship with God?

Church & Prior Children/Youth Experience

Describe why you would like to work with children/youth at Grace Church.

Do you agree with the enclosed doctrinal statement of Grace Church? yes no

If no, please explain. _____

Members/Attendees of Grace Church

How long have you attended Grace? _____ Member Regular Attendee

Describe your current and past ministry experience(s) at Grace Church, if applicable.

Members/Attendees of churches other than Grace Church

Name of church you currently attend _____

Address _____ Telephone _____

How long have you attended the church listed? _____ Member Regular Attendee

Describe your current and past ministry experience(s) at your home church, if applicable.

List churches you have previously attended in the past **five** years, if applicable.

Name of Church **City & State** **Telephone**

List previous work with children/youth including church, volunteer and employment situations.

Position _____ Name of Supervisor _____

Organization _____ Phone () _____

Address _____

City _____ State _____ Zip _____

Position _____ Name of Supervisor _____

Organization _____ Phone () _____

Address _____

City _____ State _____ Zip _____

Position _____ Name of Supervisor _____

Organization _____ Phone () _____

Address _____

City _____ State _____ Zip _____

References

List three people you've known for **at least one year**, who are not related to you, who have a definite knowledge of your character, and preferably of your ability to work with children/youth.

Individual at your present or former church

Name _____ Nature of Association _____

Address _____

City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____

Current or former employer, fellow employee, or individual from a volunteer organization

Name _____ Nature of Association _____

Address _____

City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____

Social friend or neighbor

Name _____ Nature of Association _____

Address _____

City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____

Personal Situations

- Have you ever been convicted of or plead guilty to a felony? yes no

If yes, please explain. _____

- Have you ever neglected, abused, or molested any child or youth? yes no

If yes, please explain. _____

- Do you take any medications or illicit substances that would prevent you from caring for children or youth? yes no

If yes, please explain. _____

- If you have children, have they ever been removed from your custody? yes no

If yes, please explain. _____

- Is there any circumstance or pattern in your life that would make it inappropriate for you to serve with minors or would compromise the integrity of Grace Church?

yes no If yes, please explain _____

In its ministry to children and youth, Grace Church endeavors to simultaneously protect the children/youth from harm and protect our volunteers from compromising situations and false accusations. We also desire to do all we can to minister to anyone who has been victimized. The adequate exchange of information is vital in this protective effort. Exchanging information increases protection for children/youth and volunteers and reduces the risk for all involved. Therefore, if you were a victim of abuse or molestation while a minor, sharing that information with a member of the pastoral staff is likely to help both you and us. Our desire is to protect and to minister.

Authorization for Background Investigation

The information contained in this application is correct to the best of my knowledge. I authorize any individuals, organizations and employers listed in this application to provide any information (including opinions) that they may have regarding my character and fitness for working with children. In consideration of the receipt and evaluation of this application by Grace Church, 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 or damages resulting from disclosure of any information. I waive any right that I may have to inspect any information provided about me by any person or organizations identified by me in this application.

I am aware that a criminal background investigation will be conducted on all potential volunteers desiring to serve in Children's/Youth Ministries at Grace Church. I hereby request and authorize the release of any information which pertains to any record of conviction contained in law enforcement files or in any criminal file maintained on me whether local, state, or national. I hereby release all local, state and national law enforcement agencies from any and all liability resulting from such disclosure.

I authorize photocopy and distribution of this page to necessary organizations or individuals for the purpose of obtaining any of this information.

Applicant's Signature _____ Date _____

Grace Church – Child Protection Program Compliance Statement

I hereby acknowledge that Grace Church has provided me with a copy of the Child Protection Program; that I have read the program; that I understand its contents; and I agree to abide by the procedures and policies contained within.

Applicant's Printed Name _____

Applicant's Signature _____

Date _____