



CHILDREN'S MINISTRIES' WORKER APPLICATION

We love the children attending our church and we are committed to their safety. Therefore, it is our policy that every volunteer completes this application for any position involving the supervision or custody of minors. Thank you for your cooperation and for your willingness to serve.

PERSONAL

Last Name: _____ First: _____ Middle: _____ D.O.B: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____ Grade (if applicable): _____

Occupation: _____ Employer: _____

Marital Status: Single Engaged Married Divorced Separated Widowed

Spouse's Name: _____ Does your family/spouse support you being in church ministry? _____

What skills would you bring to the children's program? _____

What other children/youth work experience do you have? _____

Have you at any time ever:

- Been arrested for any reason? Yes No
- Been convicted of, or pleaded guilty to, any crime? Yes No
- Engaged in, or been accused of, any child molestation, exploitation, or abuse? Yes No

Are you aware of:

- Having any traits or tendencies that could pose any threat to children or others? Yes No
- Any reason why you should not work with children or others? Yes No

If your answer to any of these questions is "yes", please explain in detail: _____

(Please attach additional pages if more space is needed.)

In what children's area/program(s) are you seeking to get involved? _____

Please indicate the date that you would be available to begin. _____

CHURCH ACTIVITY

How long have you attended Calvary? _____ Are you a member of Calvary? _____

If not a member, are you in the process of becoming a member? _____

How regularly do you attend a worship service (i.e. every Sunday, 2 or 3x/month): _____

What church or churches have you attended in the past 5 years?

| Church Name: | Pastor's Name: | Years attended? |
|--------------|----------------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

REFERENCES

Who in our church might recommend you for serving in Children's Ministries?: _____

Please list names of 3 personal references (other than relatives) and fill out completely:

| Name/Relationship: | Phone: |
|--------------------|--------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

APPLICANT'S STATEMENT

I recognize Calvary Church's Children's Ministry is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I authorize Calvary Church's Children's Ministry to contact any person or entity listed in this application, and I further authorize any such person or entity to provide Calvary Church with information, opinions, and impressions relating to my background or qualifications.

I authorize Calvary Church's Children's Ministry to perform a limited criminal background check on myself as a part of this application process. I release all such references from liability for any damage that may result from furnishing such evaluations to you.

I agree to abide by all policies, procedures, and doctrine of Calvary Church and Calvary's Children's Ministry and to protect the health and safety of the children or youth at all times.

Printed Name: _____

Signature: _____ Date: _____

