

CHILDREN'S AND YOUTH MINISTRY VOLUNTEER APPLICATION

Name (goes by) _____ Date ____ / ____ / ____

Note: This form is to be completed by all persons volunteering for any position involving supervision or custody of minors. This application is used by Central Baptist Church to help promote a safe environment for the children and youth who participate in our programs or use our facilities.

Any applicant who has ever been convicted of child sexual abuse, physical abuse, or domestic violence should seek other ministry opportunities and will generally not be approved for service in any church sponsored activity or program for children or youth. Applicants with criminal records of other types will be evaluated in accordance with the Church policy for background screening and will remain confidential.

All applicants must study and agree to obey any guidelines that are provided for their program and position within the church's children's and youth ministry.

THE INFORMATION ON THIS APPLICATION SHALL REMAIN CONFIDENTIAL AND WILL NOT BE DISCLOSED TO UNAUTHORIZED PERSONS AND WILL BE REVIEWED BY THE MINIMUM NUMBER OF PERSONS POSSIBLE TO MAKE A REASONABLE, INFORMED DECISION.

Applicant Identification

Full Name _____
Last First Middle Maiden

Y N Have you used any other names?
If yes, please list _____

Date of Birth _____ Place of Birth _____

Social Security # _____

Present Address _____
Street City State Zip

Home Phone (____) _____ Work Phone (____) _____

Current Employer _____

County and State of Residence for the last 7 years:

County State Dates Lived There

Please complete and sign on the back.

Please answer each question.

Circle **Y** for yes and **N** for No. You may attach extra pages for explanations.

- Y N As a church worker, do you agree to observe all guidelines and policies regarding working with youth or children?

- Y N Have you ever been convicted of a criminal offense (felony or misdemeanor) except for minor traffic violations? You will need to answer “yes” if you have entered into a plea agreement, including a deferred sentence or deferred judgment arrangement, in connection with a criminal charge. If you have been convicted of such an offense, please attach a statement of explanation, including nature of offense, date, court where conviction was entered, and any other relevant information.

- Y N Have you ever been charged with a sexual offense or offense relating to children? If you have been charged with such an offense, please attach a statement of explanation, including the nature of the offense charged, date, law enforcement agency making the charge, and any other relevant information.

- Y N Have you ever been the subject of a validated report regarding abuse of or misconduct concerning a minor?

- Y N Have you ever been disciplined or dismissed from employment or a volunteer position by any employer, including charitable and religious organizations, following an allegation of sexual misconduct, sexual harassment, or other immoral or inappropriate behavior or conduct? If so, please describe the circumstances and the name and address of the employer.

- Y N Do you have any investigation, review, or disciplinary action pending by an employer, organization in which you volunteer, licensing authority, or professional association for the sexual misconduct, violence, or misconduct involving children?

- Y N Many people have experienced abuse at the hands of others. Most of these people abhor such behavior and are especially alert and sensitive to the need to provide a safe and caring environment for children. At the same time, residual effects may remain in some people’s lives, including a hesitancy to report suspected child abuse. In order to learn whether you have had such an experience and may need some pastoral assistance in dealing with any after-effects, we need to ask whether you were ever abused or molested while a minor?
(Any survivor of childhood abuse needs love and acceptance of Central Baptist Church, and, rather than answering this question, you are invited to discuss this matter and your desire to work with youth/children with a minister at Central).

Consent to Release Information and Waiver

In consideration of the receipt and evaluation of this application by Central Baptist Church, I hereby release Central Baptist Church and 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 for damages of whatever kind or nature which may at any time result to me, my heirs, or family on account of compliance or any attempts to comply with, this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application. I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN FREE ACT.

Having made application for youth or children’s work at Central Baptist Church and desiring the Church to be informed as necessary concerning my past record and character, I authorize any persons, references, employers, churches, and organizations with whom I have had contact to release to the Church any information they may have regarding my record, character, and fitness for youth and/or children’s work. I also authorize the Church, at its discretion, to contact any law enforcement or social service agency to determine whether I have been charged or convicted of a crime. I authorize such agencies to release such information to Central Baptist Church. I release the Church, its agents, and all persons, organizations and agencies for liability for any damage which may result from the release of such information, and I further waive any right that I may have to inspect such information provided on my behalf.

My responses are truthful and accurate. I understand and agree that if they are not truthful and accurate, Central Baptist Church may determine that I am not longer qualified to be associated with its programs as a church worker, employee, or volunteer in any capacity.

Applicant’s Signature _____ Date _____

Print Name _____

Witness _____ Date _____

A photocopy of facsimile of this Authorization shall have the same effect of the original.

ANY AND ALL INFORMATION PROVIDED IN THIS FORM OR OBTAINED THROUGH THE USE OF THIS FORM SHALL REMAIN CONFIDENTIAL AND WILL NOT BE USED FOR ANY PURPOSE OTHER THAN SEEKING THE INFORMATION EXPLAINED HEREIN AND EVALUATING THE APPLICANT’S FITNESS TO SERVE IN THE CHILDREN, UPWARD, AND/OR YOUTH MINISTRY AT CENTRAL BAPTIST CHURCH.