

**PRESBYTERY OF EASTERN VIRGINIA**

801 Loudoun Avenue  
Portsmouth, VA 23707  
757.397.7063

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**PRESBYTERIAN CHURCH VOLUNTEER APPLICATION**

Complete Name: \_\_\_\_\_

Have you ever been known by any other name?  Yes  No

Other names used: \_\_\_\_\_

Social Security Account Number: \_\_\_\_\_

Gender: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address (Include City, State and Zip Code):

\_\_\_\_\_  
\_\_\_\_\_

In what **states** or **countries** have you lived in the last **ten** years?

\_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Current Church Affiliation: \_\_\_\_\_

**Employment Record** (*List current and previous employers for the last **five** years*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**CERTIFICATION**

I certify that (a) no civil, criminal, ecclesiastical complaint has ever been sustained or is pending against me for sexual misconduct; (b) I have never resigned or been terminated from a position for reasons related to sexual misconduct.

I also certify that I have read and understand the Presbytery of Eastern Virginia’s Child/Youth/Vulnerable Adult Protection Policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: If you are unable to make the above certification you may instead give, in the space provided below, a description of the complaint, termination, or the outcome of the situation and any explanatory comments you care to add.

**RELEASE**

The information contained in this application is accurate to the best of my knowledge and may be verified by the Presbyterian Church USA (PCUSA). I hereby authorize officers of the PCUSA to make any and all contacts necessary to verify my prior employment history, and to inquire concerning any criminal records or any judicial proceedings involving me as a defendant. By means of this release I also authorize any previous employer and any law enforcement agencies or judicial authorities to release any and all requested relevant information to the officers of the PCUSA.

I have read this release and understand fully that the information obtained may be used to deny me employment and/or an opportunity to volunteer and/or any other type of position from the PCUSA. I also agree that I will hold harmless the PCUSA or judicial authority from any and all claims, liabilities, and cause of action for the legitimate release or use of any information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_