

All information is confidential



Minor Volunteer Safe Church Application

We appreciate your interest in serving with us! Volunteers who work with children and youth are in a place of responsibility in the church and are expected to be examples in faith, conduct and family life. Maintaining a high standard for volunteers is one of the best ways to present Christ to the families of our church and our community.

It is our intention to find out more about the people that we are entrusting with our youth and children; therefore, this application will be asking some very personal and private questions. The information contained in this application will be treated with the utmost of confidentiality and respect. At all times, these instruments will be stored under a locked system. No one will have access without proper authorization.

The questions contained herein are not designed to offend or to pass judgment, but rather create an environment where a person's past will not hinder the ministry in carrying out their mission in a safe, fun and productive way.

This application is to be completed by ALL applicants for any position (volunteer or compensated) involving interaction with minors. This is NOT an employment application.

General Information:

Date _____

Full Name _____

Male Female

Birth Date (MM/DD/YYYY) _____

Address _____

City _____ State _____ Zip _____

Phone (H) _____ (W) _____ (C) _____

Email Address _____

Membership Information

When did you begin attending CCoF? _____

CCoF requires six months of attendance prior to volunteering with children and youth.

Individual situations may be considered based on prior experience(s).

Please check all that you have completed:

- Committing your life to Jesus Christ and trusting Him for salvation
- Baptism by immersion (Age: ____)
- Attended Pathway for Kids

I am able to make at least a 6-month commitment to this ministry:

- Yes No

I have chosen to volunteer in this ministry because:

Please list previous churches which you volunteered at involving children or youth during the past 5 years. Include dates of work, church's name and location, and work performed.

Do you have experience working with children or youth? Yes No

If yes, please give more information:

Employment (if applicable)

Present Employer _____

Employment Start Date _____ Supervisor Name _____

Address _____ City _____

State _____ ZIP _____ Phone # _____

Position(s) held _____

- Full-Time Part-Time

Spiritual Journey

We all have a spiritual history, whether we are devoted believers or still in the process of investigation. Explain your experience and walk with Jesus Christ thus far.

Service Info

Select the service time(s) you prefer to volunteer (check any/all the apply):

- Saturday at 4pm
- Saturday at 5:30pm
- Sunday at 9am
- Sunday at 10:45am

Service Positions (Please select your first and second choice):

- Audio/Video
- Worship Team
- Assistant Leader/Helper (Early Childhood Rooms)
- Small Group Leader (Later Childhood)

Please select one age group:

Nursery

Kindergarten/1st Grade

2s/3s

2nd-5th Grade (Later Childhood)

4s/5s

References

List 2 personal and 1 ministry reference who meet the following criteria:

- 1) Is over 18 years of age
- 2) Is NOT related to you
- 3) Has seen you interact with kids
- 4) Has known you for more than 1 year
- 5) Has a definite knowledge of your character.

One of your personal references MUST be a CCoF attendee.

Personal Reference #1

Name _____ Nature of Association _____

Occupation _____ Length of time known _____

City and State of Residence _____

Phone (H) _____ (C) _____ CCoF member?

Email (required) _____ Yes No

Personal Reference #2

Name _____ Nature of Association _____

Occupation _____ Length of time known _____

City and State of Residence _____

Phone (H) _____ (C) _____ CCoF member?

Email (required) _____ Yes No

Ministry Reference #3

(Must be a pastor or ministry worker; may be a CCoF staff member)

Name _____ Nature of Association _____

Occupation _____ Length of time known _____

City and State of Residence _____

Phone (H) _____ (C) _____ CCoF member?

Email (required) _____ Yes No

Applicant's Signature

Date

Parent's Signature

Date