

Grace Life Kids

VOLUNTEER APPLICATION

Name _____ Age _____ Date of Birth _____
Address _____
City _____ State _____ Zip _____
Phone _____ Work _____ Cell _____
Email _____

How long have you attended Grace Life Community Church? _____

What area(s) of Children's Ministry are you interested in? _____

If less than one year, please give names of previous church and (2) personal references.

Name of Church _____

Address _____

Phone Number _____

[Reference 1]

Name _____

Address _____

Phone Number _____

[Reference 2]

Name _____

Address _____

Phone Number _____

Are you a member of Grace Life Community Church? Yes No

Have you attended the Discover GLCC class? Yes No

Are you involved with a Connect Group at GLCC? Yes No

How long have you been a Christian? _____

Please briefly share your testimony (you may use a separate sheet of paper if necessary)

Have you worked with children previously? If so, please indicate the type of involvement, length of commitment and areas of service. Yes No

Do you have any formal training in CPR? Yes No

If yes, when were you certified? _____ Expiration Date _____

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Background Information: Grace Life Community Church is dedicated to provide a spiritually fulfilling and safe environment for all children. Unfortunately, we live in a day and time where it is necessary that we take measures to provide this type of environment. Please understand our need to ask and receive honest information regarding the following questions.

Have you ever been convicted of/pleaded guilty to any criminal offense of any kind? YES NO
If yes, please explain.

Have you ever been reported and/or investigated by the Social Services within the last 7 years? YES NO
If Yes, please explain.

Have you at any time ever participated in, or been accused/convicted/pleaded guilty to abuse or any sexual misconduct? YES NO
If yes, please explain.

_____ I understand and agree that it is critical to the ministry of GLCC that all volunteers and employees conform to the highest standards of safety and interpersonal conduct.

_____ I authorize Grace Life Community Church to contact any person or entity listed in this application. I further authorize any such person or entity to provide GLCC with information, opinions, and impressions relating to my background or qualifications.

Printed Name _____

Signature _____ Date _____

For Staff Use Only:

Staff Member:	Date:
Follow-Up:	Date:
Spoke to Church:	Date:
Spoke to References (1&2):	Date:
Comments:	

If 18 years or younger: There is no need to continue to next page.

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Permission to obtain a background check

This form authorizes the church to obtain background information and must be completed by the applicant. The Church must keep this completed form on file for at least five years after requesting a background check.

I, undersigned applicant, authorize Grace Life Community Church through its independent contractor, Protect My Ministry, to procure background information about me. This report may include my driving history, including any traffic citations, a social security number verification, present and former addresses, criminal and civil history/records, and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Grace life Community Church, if such is made within a reasonable time from the date that it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature _____ Date _____

Identifying Information for Background Information Agency
(known as "Consumer Reporting Agency")

Print (full) Name _____

Other names used (alias, maiden, nickname) _____

Current Address

Former Address

Social Security Number _____ Daytime Telephone Number _____

Date of Birth _____ Gender _____

I have had a background check completed by my current employer: YES NO (approximate date _____)

Name of employer _____ Telephone Number _____

Address _____

If you would like to make a tax deductible donation to help defray the cost, please enclose a check payable to GLCC with your form. An average background check is \$20.00. Thank you.