

VOLUNTEER GENERAL INFORMATION

Date: _____

Name: _____

Address: _____

How long have you lived in this area? _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email Address: _____

Are you: Single Married Separated
 Divorced Widowed

Spouse's name: _____

How long have you attended _____ Church? _____

Do you attend: Weekend services Wednesday services

Are you involved in a small group or Bible study? _____

Background Information

Have you ever worked in this type of ministry before? _____

If yes, where? _____

Have you ever had or been concerned that you might have an addiction to drugs, alcohol, pornography, or other addiction that might hinder your abilities as a security person? No

Yes, explain: _____

Have you ever been arrested, convicted of, or pleaded guilty to a crime? No

Yes, explain: _____

Have you ever been accused, charged, or alleged to have committed any act of neglecting, abusing, molesting, or battering any child or adult? ___No ___Yes, Explain:_____

Have you ever been treated for a psychiatric disorder? ___No

___Yes, explain:_____

Is there any circumstance in your life that would make it inappropriate for you to serve with minors or that would compromise the integrity of Community Church? _____

REFERENCES

1. Name:_____

Relationship to you:_____

Length of time known:_____

Home Phone: _____ Work Phone:_____

2) Name:_____

Relationship to you:_____

Length of time known:_____

Home Phone : _____ Work Phone:_____

3) Name:_____

Relationship to you:_____

Length of time known:_____

Home Phone : _____ Work Phone:_____

Service time(s) you are available to serve (please circle)

9am

11am

Wednesday evenings

Applicant's Statement:

All information contained in this application is true and correct to the best of my knowledge. I understand that staff at _____ Church will contact my references and I authorize those references to give any information they may have regarding my character and ability to work with minors. I release all persons or organizations from any liability for damages resulting from such disclosures. I also authorize the release of any information pertaining to records of convictions contained in law enforcement or criminal files. I release all local, state, and national agencies from liabilities as well.

Should I undertake the position of a security volunteer at _____ Church, I agree to refrain from unscriptural conduct in the performance of any duties on behalf of the Church.

Finally, I state that I have carefully read the above statement and understand it. I also understand that it is a legally binding agreement.

Print Full Legal Name: _____

Driver's License Number & State: _____

Social Security Number: _____

Date of Birth: _____

Place of Birth: _____

Former addresses (over the last 10 years) _____

Applicant's Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____
(if applicant is a minor)

Please mail this application to: _____

You may also seal the application in an envelope directed to the attention of _____ and drop in an offering bag, or give to one of the volunteers at the _____.

We look forward to having you join our ministry team!