Church Logo Here

**VOLUNTEER APPLICATION**

**(Church Name)**

*Confidential*

*This application is to be completed by all persons desiring to be involved in leadership of any (Church Name) ministry.*

**PERSONAL INFORMATION**

Legal Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First Middle Today’s Date

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number Street City State Zip

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status: Single  Engaged  Married  Divorced  Widowed 

If married, how does your spouse feel about your involvement?

Present Employer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Full-time  Part-time 

**CHURCH INFORMATION**

Do you attend (Your Church Name)? Yes  No  If not, where do you attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you been attending? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a member of (Your Church Name)? \_\_\_\_\_\_ If not, would you take the necessary steps toward membership?\_\_\_\_\_\_\_

As a volunteer, would you be willing to submit to the authority of the Elder Board? \_\_\_\_\_\_\_

List (name, address or phone) other churches you have attended regularly over the past five years:

What is your previous/current involvement in church ministries and activities?

Have you read (Church) Doctrinal Statement (copy available if needed)? Yes No

Please list and explain any concerns or disagreements you may have with (Church Name) doctrine.

What is your average monthly (Church Name) Worship attendance?

|  |  |  |  |
| --- | --- | --- | --- |
| 0-1 service | 2-3 services | 4-5 services |  |
| Which service do you attend most?  Saturday 6:00 pm | | Sunday 8:45 am | Sunday 10:45 am |

**CHRISTIAN EXPERIENCE**

Give a brief statement of your own Christian experience. (How you came to know Christ and how He is presently influencing your life)

List any gifts, calling, training, education, or other factors that would help you in working with children:

Have you read the “Children’s Ministry Volunteer Guidelines” sheet, the “Guidelines for Volunteer / Child relationships sheet”, or the “(Church Name) Nursery Guidelines and Procedures” that is attached?

Yes  No 

Have you any physical handicaps or conditions that could prove harmful to children? Yes  No  (if yes, please explain)

Have you ever been convicted of child abuse or any behavior that could prove harmful to children? Yes  No  (if yes, please explain)

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation? Yes  No  (if yes, please explain)

**REFERENCES**

Please list references (such as Pastors, Friends, Elders and Employers)

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name | City | Home Phone |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name | City | Home Phone |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name | City | Home Phone |

The information contained in this application is correct to the best of my knowledge. I authorize any person or organization listed in this application to give you any information they may have regarding my character. I release all such contacts from any liability for information shared and I waive any right to inspect references or files provided on my behalf.

Upon approval to serve, I agree to abide by the policies of Foothills Bible Church and to refrain from any unbiblical conduct while serving on behalf of (Your Church).

Note: As a volunteer, if you are working with children under 18 years of age you will need to provide us with your Social Security number and Date of Birth so we are able to process a criminal background check. We plan to regularly update this criminal background check as long as you continue working with children at (Your Church).

**Social Security Number** \_\_\_\_\_\_-\_\_\_\_-\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

**Signature Date**