

MBC Kids Children/Youth Ministry Volunteer Application

Name: _____

Daytime telephone: _____

Address: _____

In which children's/youth program(s) do you want to become involved? _____

What skills would you bring to the children's/youth program? _____

WHAT OTHER CHILDREN'S/YOUTH WORK EXPERIENCE DO YOU HAVE? (Please list)

Organization	Program	Dates	Contact
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>

HAVE YOU AT ANY TIME EVER:

- Been convicted of, or pleaded guilty or no contest to, any crime? Yes No
 - Participated in, or been accused, convicted, or pleaded guilty or no contest to abuse or any sexual misconduct? Yes No
-

ARE YOU AWARE OF:

- Having any traits or tendencies that could pose any threat to children, youth, or others? Yes No
- Any reason why you should not work with children, youth, or others? Yes No

If the answer to any of these questions is "yes," please explain in detail: _____

(Please attach additional pages if more space is needed)

CHURCH ACTIVITY

What church or churches have you attended in the past five years?

Church name: _____

Pastor's name: _____ Years attended: _____

Church name: _____

Pastor's name: _____ Years attended: _____

Church name: _____

Pastor's name: _____ Years attended: _____

SUPPLY AT LEAST TWO INDEPENDENT REFERENCES

(Not relatives. Past ministry leaders or former employees preferred.)

Name: _____

Relationship: _____ Address: _____

Phone: _____

Name: _____

Relationship: _____ Address: _____

Phone: _____

Name: _____

Relationship: _____ Address: _____

Phone: _____

CHILDREN'S/YOUTH WORK VERIFICATION AND RELEASE

I (Applicant's Name) _____ recognize that (name of organization) is relying on the accuracy of the information I provide on the Children/Youth Ministry Volunteer Application form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.

I authorize the organization to contact any person or entity listed on the Children/Youth Ministry Volunteer Application form, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release the organization and any such person or entity listed on the Children/Youth Ministry Volunteer Application form from liability involving the communication of information relating to my background or qualifications.

I have carefully read the policy and procedures of the organization, and I agree to abide by them and to protect the health and safety of the children or youth assigned to my care or supervision at all times.

Printed name: _____

Signature: _____ Date: _____

(Please read this document carefully before you sign it.)

MINOR APPLICANTS

Parental Affirmation and Consent

I, (print name) _____ affirm that I am the parent/legal guardian of the applicant. I recognize that (name of organization) is relying on the accuracy of the information provided. To the best of my knowledge, I affirm and attest that the information provided is true and correct. I further attest and affirm that I am aware of no traits or tendencies of (applicant's name) _____ that could pose any threat to children, youth, or

others. Printed name: _____

Signature: _____ Date: _____