

Worker Application:

It is the goal of **CHURCH NAME** to provide a safe and secure environment for all children, teens, adults and workers who are involved in church activities. To facilitate this goal, it is necessary to gather pertinent information from those who desire employment or offer volunteer services to our children and youth programs. The information is requested 1) for insurance purposes, and 2) as a means of protecting the welfare of those who are involved in church activities and these are the only purposes for which this information will be used.

Name: _____ Date: _____

Date of Birth: _____ SSN: _____

Have you ever used any name(s) other than the one above? If yes, please list:

Current Address: _____ Length of time: _____

Previous Address: _____

Current phone number: (home) _____ (Work) _____

Do you have a valid driver's license?

No Yes License number: _____ State: _____

Do you have a CDL?

No Yes License number: _____ State: _____

Position(s) applying/volunteering for: _____

Current Employer: _____ How long? _____

Previous Employers (last 5 years): _____

Is there any reason that you should not work with or around children? No Yes

Explain: _____

Have you ever been the subject of a child abuse investigation? No Yes

If yes, please provide details: _____

Have you ever been convicted or pleaded guilty to a criminal offense? No Yes

If yes, please provide details: _____

Please list your educational background:

Name Graduate? Year Degree/course of study

High School: _____

College: _____

Other: _____

Please provide the following church information:

What, if any, church affiliation do you have? _____

How long have you attended that church? _____ Are you a member? No Yes

Please list other churches you have been affiliated with: _____

Have you ever worked with children or youth before? No Yes List where: _____

Please list 3 references:

Name: _____ Phone: _____

Address: _____ How long have you known this person? _____

Name: _____ Phone: _____

Address: _____ How long have you known this person? _____

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Address: _____ How long have you known this person? _____

I affirm that all the information provided is true and accurate. I hereby give **CHURCH NAME** permission to perform an investigation of my past employment, education, and background, and release from liability all persons, companies, or corporations supplying such information. I also release the church from any liability that might result from making such an investigation. I understand that any false statements or implications made by me on this application or other required documentation shall be considered sufficient cause for denial of employment or discharge.

Worker's Signature

Date

Please attach a photocopy of both the front and back of your valid driver's license.

