

Teen Volunteer Application:

It is the goal of **CHURCH NAME** to provide a safe and secure environment for all children, teens, 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: _____

Current Address: _____

Phone number: _____

What School do you attend: _____

Position(s) applying/volunteering for: _____

If you have been employed or worked as a volunteer please describe: _____

_____ How long? _____

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 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? _____

Name: _____ Phone: _____

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

Name of parent or legal guardian: _____

Parent/guardian address: _____

Parent/guardian phone: _____

I hereby give my child permission to serve as a volunteer working with children as described above.

Signature of parent/guardian: _____ Date: _____
