



# **Volunteer Application**

# Contact / Personal Information

Date: \_\_\_\_\_

Mr.  Mrs.  Ms. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

## Emergency Contact

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

# Education and Employment

Please mark your highest level of education completed, and put the year completed in the blank.

High School: \_\_\_\_\_  College: \_\_\_\_\_  Other: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Length of Current Employment: \_\_\_\_\_

# Ministry and Volunteer Experience

Please list all ministry / volunteer experience: \_\_\_\_\_

Pertinent Certification or Training (e.g. CPR, First Aid, etc.): \_\_\_\_\_

# Areas of Interest

Which Children's Ministry programs would you like to consider joining as a volunteer?

- Bible Club (after school program)
- Bible Zone (grade school children [PreK-5<sup>th</sup> grade] on Sunday mornings and Wednesday nights)
- Preschool (preschool children [newborn-3 years old] on Sunday mornings and Wednesday nights)

# References

The following cannot be relatives, must be over 18, and must have known you for at least 6 months.

## Reference 1:

Mr.  Mrs.  Ms. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

How long have you known him / her? \_\_\_\_\_

## Reference 2:

Mr.  Mrs.  Ms. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

How long have you known him / her? \_\_\_\_\_

# Pertinent Questions

In order to best protect and serve the children with whom you may be working, please answer all questions truthfully. We pledge to protect your privacy in these sensitive issues and promise to handle all matters appropriately and with the utmost integrity and discretion. If you answer "yes" to any of the following questions, please attach an explanation on a separate piece of paper.

- Do you have any mental, behavioral, or physical condition or illness which could affect your ability to work with children? .....▶  Yes  No
- Are you taking any prescription medications with side effects that might affect your ability to work with children? .....▶  Yes  No
- Are there any allergies, illnesses, or other health concerns we should be aware of? .....▶  Yes  No
- Have you ever been convicted of or plead guilty to a crime? .....▶  Yes  No
- Have you ever been accused of, engaged in or investigated for any form of sexual misconduct or child abuse involving a minor or an adult? .....▶  Yes  No
- Have you used illegal drugs in the past 12 months? .....▶  Yes  No
- Have you gone through treatment for alcohol or drug abuse in the past 12 months? .....▶  Yes  No
- Have you ever had any painful life experiences as a child / minor that would hinder you from a productive ministry with children? .....▶  Yes  No
- Have you ever been asked to leave a church or otherwise terminate your voluntary service to any program? .....▶  Yes  No
- Have you ever been asked to step away from ministry or work with children in any setting, paid or volunteer? .....▶  Yes  No
- Is there any reason why you should not work with children, youth, or others? .....▶  Yes  No
- Is there anything in your past or current life that might be a problem if we found out about it later? ..▶  Yes  No

# Salvation Testimony Questions

What was life like before you made the decision to follow Jesus Christ? (Ephesians 2:1-3)

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How did you realize you needed Christ? (Ephesians 2:4-7, Romans 3:10-12)

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Why and how did you receive Jesus as Savior? (Ephesians 2:8-9, Romans 10:9-10, Romans 5:1)

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What difference has the decision to follow Christ made in your life? (Ephesians 2:10, Romans 8:1)

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How are you currently seeing God work in your life? (Philippians 2:13, Romans 8:38-39)

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# Signature and Agreement

By signing below, I indicate that:

- I have carefully read this document and recognize that it is a legally-binding agreement.
- I certify that, to the best of my knowledge, all answers and information given are true and complete.

Date: \_\_\_\_\_

Print: \_\_\_\_\_

Sign: \_\_\_\_\_

# Parent / Guardian Agreement (if under 18 years of age)

By signing below, I indicate that:

- I and my son / daughter have carefully read this document and recognize that it is a legally-binding agreement.
- I certify that, to the best of my knowledge, all answers and information given are true and complete.

Date: \_\_\_\_\_

Print: \_\_\_\_\_

Sign: \_\_\_\_\_

Relationship: \_\_\_\_\_

**PLEASE COMPLETE IF YOU ARE 18 OR OLDER  
CRIMINAL HISTORY CHECK CONSENT FORM**

I, \_\_\_\_\_ (*print name*), hereby authorize Western Hills Baptist Church, Inc. to obtain information pertaining to any charges and/or convictions I may have had for violation of municipal, county, state, or federal laws. This information will include, but not be limited to, allegation regarding and convictions for crimes committed upon minors and will be gathered from any law enforcement agency of this state or any state or federal government, or from third-party providers of information originally obtained from law enforcement or court records.

I understand that I will be given an opportunity to challenge the accuracy of any information received that appears to implicate me in criminal activities. To facilitate this challenge, I will be told the nature of the information and the agency from which it was obtained. It will be my responsibility to contact that agency. I further understand that until Western Hills Baptist Church, Inc. receives notification from that agency concerning me, my application will be deferred.

As an applicant for Western Hills Baptist Church, Inc. volunteer or staff position, I hereby attest to the truthfulness of the representation I have made. Except as I have disclosed, I have not been found guilty of, or entered a plea of nolo contendere or guilty to any offense similar to those listed on the application. Further, other than for the offenses I have disclosed, I have not had a finding of delinquency or entered a plea of nolo contendere or guilty to a petition of delinquency under the juvenile laws of this state or of any other state for any acts similar in nature to those listed on the application.

I further attest that I have not been judicially determined to have committed abuse or neglect of a child; nor do I have a confirmed report of child abuse or neglect or exploitation which has been uncontested or upheld administratively under the laws of this or any other state.

I understand that I must be truthful and, if any statement I have made is found to be false, my application will be denied by Western Hills Baptist Church, Inc. or, if already accepted, terminated from my Western Hills Baptist Church, Inc. position.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**COMPLETE THIS SECTION IF YOU ARE 18 OR OLDER:**

Full Name of Applicant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

State of Issuance: \_\_\_\_\_

Date of Expiration: \_\_\_\_\_