

Volunteer Application for Adults Working With Children & Youth

Responses will be kept fully confidential

Name	Date
Address	
Home Phone	Cell Phone
E-mail	
Position applying for	
Occupation	
Where employed	Full Time / Part Time
Are you currently a member of Spirit of Joy?	YES NO
List name & address of all churches you have	e attended regularly during the past five years:
Experience:	
List <i>all</i> previous church and non-church wor <i>page</i> , <i>if necessary</i> .	rk involving children, youth or vulnerable adults. Use separate
Organization's name	
Address	
Dates involved	
List any training, education, gifts or other fa are applying. (degrees, medical training, talents, training	ctors that have prepared you for the ministry for which you <i>, etc.</i>)
Personal References (Business-related references)	
TelephoneBus	siness Relationship
Name	
Address	
TelephoneBus	siness Relationship
Name	
Address	
TelephoneBus	siness Relationship

Background:

(Please answer each question. If for any reason you prefer not to answer any of the questions in writing, you may discuss your answers in confidence with the Senior Pastor or designate.)

1. Have you ever been convicted of, pled no contest to, or received pre-trial diversion for, to a crime involving allegations of sexual abuse, molestation, physical abuse or any similar charges? If "yes," please explain in detail and attach a separate sheet if necessary. Yes No

2. Have you ever been convicted of, pled no contest to, or received pre-trial diversion for any felony or misdemeanor involving drugs, alcohol or violence? If "yes," please explain in detail and attach a separate sheet if necessary.

3. Do you have any issues in your background that would make it difficult for you to work with children, youth or vulnerable adults, or abide by these policies due to past or ongoing abuse of any kind? If "yes," please explain in detail and attach a separate sheet if necessary.

____Yes ____ No

Applicant's Statement:

- The information contained in this screening application is correct to the best of my knowledge
- I agree to allow Spirit of Joy Lutheran Church to check my references and verify my fitness for the position.
- I authorize any references or churches listed in this application to give any information that they may have regarding my character and fitness for work with children, youth or vulnerable adults. In consideration of the receipt and evaluation of the application by Spirit of Joy, I release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages for release of the requested information.
- Should my application be accepted, I agree to be bound by the Constitution, Bylaws and policies of Spirit of Joy Lutheran church, and to perform my services on behalf of the church in accordance with scriptural conduct.
- I agree that I have made the decision to volunteer in this position prayerfully and will do my best to serve in a way that will be pleasing to God.

I further state that I HAVE CAREFULLY READ THE ABOVE RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN FREE ACT.

This is a legally binding agreement which I have read and understood.

Applicant's Signature	Date
Print Applicant's Name	
Witness	Date