

## SAMPLE CHILDREN/YOUTH MINISTRY VOLUNTEER APPLICATION

(s) do you want to become involved?		
children's/youth program?		
H WORK EXPERIENCE DO YOU HAVE? (Please lis	t)	
Program Dates		Contact
Been convicted of, or pleaded guilty or no contest to, any crime?		□No
<ul> <li>Participated in, or been accused, convicted, or pleaded guilty or no contest to abuse or any sexual misconduct?</li> </ul>		□No
• Having any traits or tendencies that could pose any threat to children, youth, or others?		□No
<ul><li>Any reason why you should not work with children, youth, or others?</li></ul>		□No
ions is "yes," please explain in detail:		
(Please attac	h additional trages if s	nore stace is needed
	(s) do you want to become involved?	(s) do you want to become involved?  children's/youth program?  H WORK EXPERIENCE DO YOU HAVE? (Please list)  Program Dates  Ity or no contest to, any crime?  convicted, or pleaded guilty or no contest ct?  yes  at could pose any threat to children, youth, or others?

This sample form is not intended to be used for an employee or an applicant for employment, as you may not be able to ask some of the questions in your state. Check with your local attorney.

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CHURCH ACTIVITY	
What church or churches have you attended in the past five $% \left( 1\right) =\left( 1\right) \left( 1\right) \left$	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 employee	
Name:	
Relationship:	
Phone:	
Name:	
Relationship:	
Phone:	
Name:	
Relationship:	
Phone:	
CHILDREN'S/YOUTH WORK VERIFICATION AND RELEASE	
I (Applicant's Name)	Children/Youth Ministry Volunteer Application form.
I authorize the organization to contact any person or entity I Application form, and I further authorize any such person or opinions, and impressions relating to my background or qua	entity to provide the organization with information,
I voluntarily release the organization and any such person or Volunteer Application form from liability involving the comm or qualifications.	
I have carefully read the policy and procedures of the organi. health and safety of the children or youth assigned to my car	
Printed name:	
Signature:	
(Please read this document carefully before you sign it.)	

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MINOR APPLICANTS	
Parental Affirmation and Consent	
I, (print name) guardian of the applicant. I recognize that (name of organization) information provided. To the best of my knowledge, I affirm and a true and correct. I further attest and affirm that I am aware of no that could po	s relying on the accuracy of the ttest that the information provided is
Printed name:	_
Signature:	_ Date:

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