

Application for Children/Youth Ministry

CONFIDENTIAL

For use by church staff ONLY



This application is to be completed for any position involving the supervision or custody of minors. Its purpose is to help the church provide a safe and secure environment for children involved in any of our ministries.

We appreciate your ministry with us at Hillcrest EFC and your cooperation in completing this questionnaire.

FULL NAME _____ PHONE# _____
ADDRESS _____ EMAIL _____
SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____
DRIVERS LISCENSE NUMBER _____ DRIVERS LISCENSE STATE _____

(The above information is needed for a background check. If you would rather not give your SS# & DL#, contact the church office for a link so you can submit your own background check to a secure provider.)

1. What class are you interested in teaching?
2. Please describe briefly how and when you became a Christian:
3. On what scriptural texts do you base your faith?
4. List all previous church work involving children or youth within the last 5 years (include name of church, location, kind of work & approximate dates):
5. List all previous non-church work involving children or youth within the last 5 years. (include name of organization, location, kind of work & approximate dates):

6. Have you ever been arrested or convicted for a crime involving any kind of child abuse or child molestation, child neglect, any unlawful sexual offense or other related areas?

_____ NO _____ YES

If yes, give details (know that it will be investigated):

- ◆ Are there any other things we should be aware of in connection with your desire to minister with children or youth? (any traits or tendencies that might pose a threat to children, youth or others)

PERSONAL REFERENCES

Please list 2 references (other than relatives) who know you well and whom we may contact concerning your character and abilities in working with children and youth.

NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

RELATIONSHIP TO YOU: _____

NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

RELATIONSHIP TO YOU: _____

I have read, understand and agree to abide by the *Child Abuse Prevention Policy* of the Hillcrest Evangelical Free Church. The information I have provided above is correct and to the best of my knowledge. I give permission to have my personal references contacted and I consent to and authorize a thorough investigation of my background, character and experiences as it relates to my qualifications for serving in children's and youth ministries.

Signature

Date

Parent or Guardian signature if applicant is under 18 years old

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Signature of Approval

Date