

VOLUNTEER APPLICATION FOR CHILDREN'S MINISTRY

**First Assembly of God
Fort Myers, Florida**

Thank you for your interest in volunteering in children's ministry. God truly does call people to do His work and does gift them and empower them for the work. The FIRST ASSEMBLY OF GOD ministry staff is delighted to pray with you concerning this open door of ministry.

This application is to be completed by all volunteer candidates for children's work. It will be used to help the church get to know you and to help provide a safe and secure environment for our children. Confidential information will be reviewed by the appropriate church leadership staff only.

Information provided is about both your past and current lifestyle. Please understand that we are well aware of the power of the blood of Jesus to forgive and of the fruits of repentance. Still, a full disclosure is necessary in order for the church staff to make wise and prayerful decisions. Please be encouraged to know that many factors are weighed before an applicant is accepted or not. Pray for those in ministry who must guide and protect the flock of God.

PERSONAL INFORMATION - CONFIDENTIAL

Date _____

Name _____
Last First Middle (Maiden)

Present address _____
Street City State Zip

Prior Address if at present address less than a year:

_____ Street City State Zip

Home phone _____ Birthday _____

Cell phone _____ Email _____

Employer _____ Phone _____

Marital Status:

Married Single Engaged Separated Divorced Remarried Widowed

Number of children _____ Name & Ages of children _____

What type of position are you looking for? Teacher Assistant Helper Substitute

Please check the age group with which you are most interested in working:

Nursery (Birth – 36 months)

Preschool (3's – 5's)

Early Elementary (K – 2nd Grade)

Upper Elementary (3rd – 5th Grade)

Weekend Services:

- Saturday Service (6:00 pm)
- Sunday School (9:30 am)
- Kids' Church (11:00 am)

Wednesday Evening:

- Rainbows (Preschool)
- Royal Rangers (Boys' Club)
- Mpact (Missionettes) (Girls' Club)

Frontline Ministries:

- Greeters
- Security
- Desk Services

Other Ministries:

- Resource Room
- Community Outreaches
- Kids Choir
- Junior Bible Quiz
- Camp Counselor
- Bus Driver (CDL Required)
- Special Needs
- Mom's Day Out
- KidzTown Café
- Camp Wannabethere

What date would you be available? _____

PERSONAL REFERENCES

(Please use *recent* former Ministers or people you were in ministry with whenever possible. Do not use former *employers* or *relatives*)

PLEASE fill out full addresses and phone numbers

Name: _____

Name: _____

Street: _____

Street: _____

City: _____ State _____ Zip _____

City: _____ State _____ Zip _____

Telephone: _____

Telephone: _____

I waive my right to review references provided on my behalf. Yes No

CHURCH ACTIVITY

When did you become a Christian? _____

Are you filled with the Holy Spirit (Acts 2:4)? Yes No If not, are you open to such an experience? Yes No

How long have you been attending FIRST ASSEMBLY? _____

Are you a member of FIRST ASSEMBLY? Yes No If not, are you willing to attend a class? Yes No

Are you faithful in your witness, worship, and giving? Yes No

Are you in full support of the ministry and leadership of FIRST ASSEMBLY OF GOD? Yes No

Give a brief personal testimony (use separate page if needed)

List names, addresses and phone numbers of other churches you have attended during the past five years:

Church Name _____ Address _____ Phone# _____

Church Name _____ Address _____ Phone# _____

List all previous work involving children/youth (identify organization and type of work)

List any gifts, callings, training, education or other facts that have prepared you for children/youth work:

APPLICANT'S STATEMENT

As a volunteer I agree to faithfully attend as many scheduled meetings and training seminars as possible as provided by FIRST ASSEMBLY OF GOD for the purpose of personal and ministry enrichment.

The information contained in this volunteer application is correct to the best of my knowledge. I authorize any references or churches listed in the application to give you any information they may have regarding my character and fitness for children/youth work, and I release all such references from liability for any damage that may result from furnishing such evaluations to you.

Should my application be accepted, I agree to be bound by the Constitution and Bylaws and policies of FIRST ASSEMBLY OF GOD, and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I further state that **I HAVE CAREFULLY READ THE FOREGOING 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 understand.

Applicant's signature _____ Date _____

LEGAL QUESTIONNAIRE - CONFIDENTIAL

Social Security # _____ Driver's License # _____

Name: _____
Last (Maiden) First Middle

If you have ever used other names, please provide complete name(s) and date in use:

Name: _____ Date: _____

Name: _____ Date: _____

We believe that those involved in ministry should hold to a Biblical standard for life and conduct. Consequently, we ask you to volunteer information about your involvement with any of the following (over the last 24 months):

Alcoholic Beverages	<input type="checkbox"/> Yes <input type="checkbox"/> No	Gambling	<input type="checkbox"/> Yes <input type="checkbox"/> No	Pornography	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tobacco	<input type="checkbox"/> Yes <input type="checkbox"/> No	Immoral Sexual Behavior	<input type="checkbox"/> Yes <input type="checkbox"/> No	Occult Practices	<input type="checkbox"/> Yes <input type="checkbox"/> No
Illegal Drugs	<input type="checkbox"/> Yes <input type="checkbox"/> No	(adultery, fornication, homosexuality)			

Do you have any other life controlling habits, addictions or compulsions? Yes No If yes, please explain:

Have you any physical handicaps or conditions that prevent you from performing certain types of activities? Yes No

If yes, please explain: _____

Have you ever been convicted of a criminal offense (felony or misdemeanor, excluding minor traffic violations)? You will need to answer "Yes" if you have entered into a plea agreement, including a deferred sentence or deferred judgment arrangement, in connection with a criminal charge. Yes No. If you have been convicted of such an offense, please attach a statement or explanation, including nature of offense, date, court where conviction was entered and any other relevant information.

Have you ever been convicted of a sexual offense, offense relating to children or crime of violence (that is not covered in question above)? Yes No. If you have been convicted of such an offense, please attach a statement or explanation, including nature of offense charged, date, law enforcement agency making the charge and any other relevant information.

Have you ever been reported to a social services agency, law enforcement authority, child abuse registry or similar organization regarding abuse or misconduct involving children? Yes No. If yes, please explain:

Have you had any painful experience (personal abuse in any form) that has better equipped you, or may hinder you from a productive ministry? Yes No. If yes, please explain:

Have you ever been the subject of any disciplinary action, transfer or dismissal, or been named as a defendant in a civil lawsuit, as a result of an accident or mishap involving children? Yes No. If yes, please explain:

Have you ever been subject to any disciplinary action (including discharge) or investigation by a church, religious or other organization or by an employer? Yes No. If yes, please explain.

Be assured that your comments will be held in strict confidence.

APPLICANT'S STATEMENT

The responses I have provided in completing this volunteer application form are complete, truthful and accurate. I hereby authorize FIRST ASSEMBLY MINISTRIES to make inquiries concerning my background in connection with evaluating the information I have provided on this form and in the application process, including a criminal records check. I hereby authorize all persons associated with me, including churches, employers, law enforcement agencies, licensing and social services agencies, to release any information contained in their files or records concerning me to the Church and its representatives. In consideration of the receipt and evaluation of this application form by the Church, I hereby release FIRST ASSEMBLY MINISTRIES and their directors, employees, agents, representatives and any other person or organization, including record custodians, that may release information concerning me, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs or family on account of inquiries concerning my background and any disclosures of information concerning me to FIRST ASSEMBLY MINISTRIES. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Applicant's Signature

Date

Applicant's Name (please print)

REFERENCE CONTACT FORM – OFFICE USE ONLY

Name of Applicant _____

Reference or church contacted _____

Date and time of contact _____

Person contacting the reference or church _____

Method of contact _____

Summary of conversation:

Department Head Signature

Date