

CHILDREN & YOUTH WORKER MINISTRY APPLICATION



Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone number: _____ E-mail address: _____

Social Security Number: _____ Birth Date: _____

Youth Work Experience

Organization	Program	Dates	Contact
_____	_____	_____	_____
_____	_____	_____	_____

Do you have any condition that might restrict or prevent you from performing certain types of activities in the position for which you are applying? No Yes: please explain _____
(Example: Are you able to lift children?)

Do you have any contagious or infectious disease(s) or condition(s) that could be transmitted to others in your volunteer worker capacity?
 No Yes: please explain _____

Have you ever been arrested or convicted of any crime?
 No Yes: please explain _____

Have you ever been convicted of or pleaded guilty or no contest to any criminal offense of any kind?
 No Yes: please explain _____

Have you ever participated in, or been accused, convicted or pleaded guilty or no contest to abuse or any sexual misconduct? No Yes: please explain _____

Have you ever been subject to any disciplinary action, dismissal of injury or been asked to resign or transfer from any position by an employer, church, volunteer organization or any other entity?
 No Yes: please explain _____

Are you aware of any traits or tendencies that could pose any threat to children, youth or vulnerable adult? Yes No
If yes, please explain: _____

Do you have a valid driver's license? Yes No

Ministry Activities

What church or churches you have you attended in past five years. Are you a member of First Baptist Church? Yes No

Church Name	Years Attending
_____	_____
_____	_____
_____	_____

List any previous training (church or non-church related) you have had working with children or youth, including the location and dates in the last five years.

Are you a Christian? No Yes: please explain your relationship with Christ:

Check all ministry positions listed below in which you have previous experience.
Circle all ministry positions listed below in which you are interested.

- | Age Group | Activity | | Ministry |
|---|--|---|---|
| <input type="checkbox"/> 0 – 2 | <input type="checkbox"/> Music | <input type="checkbox"/> Transportation | <input type="checkbox"/> Kids on the Hill (0-5 years) |
| <input type="checkbox"/> 2 – 5 | <input type="checkbox"/> Story telling | <input type="checkbox"/> Administration | <input type="checkbox"/> Children’s Midweek Ministry |
| <input type="checkbox"/> K – 5th grades | <input type="checkbox"/> Crafts | <input type="checkbox"/> Babysitting | <input type="checkbox"/> Middle School Ministry |
| <input type="checkbox"/> 6 – 8th grades | <input type="checkbox"/> Nursery | <input type="checkbox"/> Game/Fun Time | <input type="checkbox"/> High School Ministry |
| <input type="checkbox"/> 9 – 12th grade | <input type="checkbox"/> Teaching | | <input type="checkbox"/> Sunday School |

References (Other Than Relatives)

Name	Address (Residential or email)	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

This application is to be completed by current employees, prospective employees or anyone desiring a position in ministry to minors or vulnerable adults. It is used to help First Baptist Church provide a safe and secure environment for those children and teens to participate in its programs. This information is required for all prospective workers and all information will be treated in a confidential manner. Completion of this form does not guarantee a ministry position. The Christian Education, Children and Youth Ministry Teams are responsible for the processing of this application along with the enforcement of children’s ministry guidelines.

I grant permission for church leadership to conduct a thorough background check and authorize any references of churches or organizations listed to release any information they may have regarding my character and fitness to work with children, youth or others, and I release all such references and First Baptist Church from any liability whatsoever as a result of furnishing such evaluations or upon receiving background information. I hold harmless from liability First Baptist Church, its pastors, staff, employees, volunteers or other workers with regard to any decision made regarding my application. I acknowledge that First Baptist Church has an at will policy and if I am accepted for employment or volunteer position of any kind, my employment or assistance may be terminated, either by myself or the church, at any time, with or without notice. I understand and agree to be bound by the by-laws, policy and statement of Faith of First Baptist Church, should my application be accepted.

I agree to notify First Baptist Church, in writing, immediately upon discovery of any changes affecting any information provided in this application. The information contained in this application is correct to the best of my knowledge.

Printed name: _____

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____