

Volunteer information Form
RIDGE UNITED METHODIST CHURCH
Children's and Youth Ministry Application

This form is to be completed by all applicants for any position involving supervision, custody or care of children or youth. This information is used by Ridge United Methodist Church to provide a safe and secure environment for the children and youth that participate in our ministries and programs. All Workers will receive specific training on the Child Protection Guidelines and Procedures of Ridge United Methodist Church.

Date of Application _____

Name _____
 Last First Middle

List any name(s) that you have used in the last ten years. Include dates of use.

 Last First Middle Dates of use

Address

 Street Address City State Zip Code

List previous address, if less than five years at present address:

 Street Address City State Zip Code

Telephone Number:

 Home Work Other

E-Mail Address

Do you have a driver's license? _____ List license number and state of issue _____

In what type of ministry are you interested? Please include age(s) of children or youth you would like to work with.

What are your gifts, callings, training, or other factors that have prepared you for work with children and/or youth?

List three people who know you well who can be contacted as a reference. References can include people who know your gifts and talents with children and youth, past or present coworkers, past or present church members, and/or people who have known you for an extended period of time. References will only be contacted if there are questions.

Name of Reference	Telephone	Years Known	Relationship

All applicants must agree to obey the Child Protection Guidelines and Procedures of Ridge United Methodist Church. All answers on this form will be treated in the strictest confidence. Any applicant that has ever been convicted of child sexual abuse, physical abuse, or domestic violence should not volunteer service in any church sponsored program or ministry for children or youth.

- Y** **N** Have you ever been convicted of, or plead guilty to, a crime?
- Y** **N** Have you ever been reported to a social service agency, law enforcement authority child abuse registry, or similar organization regarding abuse or misconduct involving children less than 18 years of age?
- Y** **N** Have you ever been subjected to expulsion, reprimand, or other discipline by a church, denomination, or other organization?
- Y** **N** Is there any circumstance in your background that would call into question your being entrusted with the supervision, guidance and care of minors?
- Y** **N** Were you abused as a child?
(You may leave this answer blank and discuss your answer in confidence with a pastor. Any person who is a survivor of childhood sexual or physical abuse needs the love and acceptance of the church family.

Answering yes to this question does not mean you are not welcome as a worker with children or youth.)

I state that the information contained in this application is true and correct to the best of my knowledge. I understand and agree that if any information is not true and accurate, Ridge United Methodist Church may determine that I am no longer qualified to be associated with volunteering for its programs involving with children and youth.

I authorize any references, listed on this application to give Ridge United Methodist Church any information that they may have regarding my character and fitness for work with children and youth.

I agree to be bound by the Child Protection Guidelines and The Code of Ethics of Ridge United Methodist Church.

I understand that any violation of these guidelines may be grounds for dismissal as an employee or volunteer working with children or youth.

I further state that I sign this release as my own free act.

Applicant's Signature _____

Date Signed _____

Permission to Obtain a Background Check

(This form authorizes the church to obtain background information and must be completed by the applicant. The church must keep this completed form on file for at least two years after requesting a background check.)

I, the undersigned applicant (also known as “consumer”), authorize Ridge United Methodist Church to procure background information (also known as a “consumer report and/or investigative consumer report”) about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Ridge United Methodist Church, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature: _____ Date: _____

Identifying Information for Background Information Agency (also known as “Consumer Reporting Agency”)

Print Name: _____

First
Middle
Last

Other Names Used (alias, maiden, nickname): _____

Current Address: _____

Street /P. O. Box
City
State
Zip Code
County
Dates

Former Address: _____

Street /P. O. Box
City
State
Zip Code
County
Dates

Social Security Number: _____ Daytime Telephone Number: _____

Driver’s License Number: _____ State: _____ Date of Birth: _____ Gender _____