

CHILD & YOUTH WORKER APPLICATION
Grace Bible Fellowship Church

This form is to be completed by any person seeking to volunteer in any position involving the supervision of or care for minors.

Name

LastFirstMiddle

Address

StreetCityStateZip

E-mail Address: _____ Phone Number: _____

Personal References: (Please list three)

NAME	ADDRESS	PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you profess to have a relationship with Jesus Christ? (Please check one)

_____ Yes _____ No

Are you a member of Grace Bible Fellowship Church? (Please check one)

_____ Yes _____ No

Please describe your relationship with Christ (be sure to include how it began).

Why do you want to work with children or youth at Grace BFC?

What do you consider to be your gifts and abilities regarding children & youth ministry?

Have you read Grace BFC's Child Protection Policy, Child Abuse Reporting Procedure, Discipline Involving Children and Youth, and Child Volunteer Code of Ethics documents, and are you willing to follow all procedures outlined within them? _____ Yes _____ No

Have you ever been arrested for, charged with, under probation for, or convicted of either sexual or physical abuse? (Please check one) _____ Yes _____ No
If yes, please explain on separate piece of paper and attach it to this form.

Have you completed mandated reporter training? _____ Yes _____ No
If yes, please attach certificate to this form or fill out the information below:

Date Completed: _____ Organization: _____

By signing below, I declare that Grace Bible Fellowship Church has permission to use my information for future background checks in order to maintain compliance with state law.

Signature Clearly Print Name Date

By signing below, I declare that all the above information is true to the best of my knowledge.

Signature Clearly Print Name Date