

Child Protection Policy
Volunteer Application
First Christian Church of Decatur

PERSONAL INFORMATION

Name _____,
Last First Middle Int.

Street Address _____

City/State/Zip _____

Daytime Phone (____) _____ Evening Phone (____) _____

E-mail address _____ Date of Birth ____ / ____ / ____

VOLUNTEER SERVICE

In what ministry area are you interested in volunteering?
_____ Children's Ministry (birth through 5th grade)
_____ Youth Ministries (6th through 12th grade)

Why are you interested in volunteering for ministry to children/youth?

Have you volunteered with children/youth at FCCD before? YES _____ NO _____

If YES, in what capacity did you volunteer? _____

If NO, what prior experience do you have working with children/youth?

Do you have first-aid training? YES _____ NO _____ if yes, when _____
Do you have CPR training? YES _____ NO _____ if yes, When _____

PRELIMINARY SCREENING INFORMATION

Have you ever been arrested for, charged with, convicted of, or plead guilty to a crime, either misdemeanor or a felony (including but not limited to drug related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)? Answering “yes” to this question does not automatically disqualify you from service.

YES _____ NO _____

If YES, please explain fully _____

Have you ever been exposed to an incident of child abuse or neglect? YES _____ NO _____

FAITH

Are you a member of First Christian Church of Decatur? YES _____ NO _____

If YES, how long have you been a member of FCCD? _____

If NO, please list the name, address and phone number of the church you currently belong to or have regularly attended over the past 5 years.

Please summarize your faith journey and how you came to know Christ as Lord & Savior.

REFERENCE CHECKS

Please list three personal references (people not related to you by blood or marriage) from which we contact at least two. Include at least one reference who has known you for a minimum of five years and one who is a member of the First Christian Church of Decatur. If you have not been a member of FCCD for more than one year, please list your previous church as one of the references.

Volunteer's Name _____

Name _____ EMAIL ADDRESS _____

Street Address _____

City/State/Zip _____

Daytime Phone (____) _____

Relationship _____ Length of Relationship _____

Name _____ EMAIL ADDRESS _____

Street Address _____

City/State/Zip _____

Daytime Phone (____) _____

Relationship _____ Length of Relationship _____

Name _____ EMAIL ADDRESS _____

Street Address _____

City/State/Zip _____

Daytime Phone (____) _____

Relationship _____ Length of Relationship _____

Applicant's Statement

VOLUNTEER

Authorization for Release of Background Information

In connection with my application for volunteer service with First Christian Church of Decatur, I authorize First Christian Church of Decatur to solicit background information relative to my criminal record history. I understand that First Christian Church of Decatur may conduct inquiries into my background that may include criminal records, personal references and other public record reports pertaining to me.

The information contained in this application is current to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children or youth work. In consideration of the receipt and evaluation of this application by First Christian Church of Decatur, I hereby release any individual, church, youth organization, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of any kind or nature which may at anytime result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. 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.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THE RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and understand.

Name _____,
Last First Middle

Maiden Name _____

Date of Birth _____ Place of Birth _____

Social Security No. _____

Current Address: _____

City/State/Zip: _____

How long at this address: _____

Previous Addresses: (up to 10 years)

City/State/Zip: _____

How long at this address: _____

If the position, which you are applying to volunteer, involves driving children/youth to activities off the church campus, please include the following driver's licenses information so that we can pull your Motor Vehicle Report.

Driver's License Number _____ State of License _____

