



Children and Youth Worker Application

Confidential: this application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors. This is not an employment application form. It is used to help the church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

Date: _____ Date of Birth _____ Age: _____

Identity must be confirmed with a state driver's license or other photo ID

Name: _____
Last First Middle

Current Address: _____

City State Zip

Phone: _____ Work: _____

Email address: _____

Social Security Number (for risk prevention): _____

Indicate which ministry you would like to serve: _____ Children's _____ Youth _____ Van

Please indicate the date you would be available to begin: _____

What is the minimum length of commitment you can make: _____

Have you ever been convicted of or pleaded guilty to a crime? _____
(If yes, please explain on a separate sheet of paper)

Do you have a current driver's license? _____ State _____ License # _____

Personal testimony of salvation (if not a member of SNMBC): _____

Name of church and address of which you are a member (if not at SNMBC):

List other churches you've attended or have been a member in the last 5 years:

Please list all previous church work involving children or youth (church name, type of work, dates):

Please list all non-church work involving children or youth (name of organization/location, type of work, dates):

Please list any abilities, training, education or other factors that have prepared you for children or youth ministry:

Please list 3 personal references (name/address/phone; please do not include employers or relatives):

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give any information (including opinions) that they may have regarding my character and ability related to children or youth ministry. In consideration of the receipt and evaluation of this application by South New Milford Baptist Church of New Milford, PA: 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 whatever kind or nature which may at any time result to me, my heirs, or family on account of my compliance or any attempts to comply, with this authorization.

Should my application be accepted, I agree to be bound by the by-laws and policies of South New Milford Baptist Church and to refrain from any unchristian conduct that is not 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.

I have received a copy of the child abuse policy of South New Milford Baptist Church, New Milford, PA and the Employee and Volunteer Guidelines and am familiar with the meaning and implementing of the policies.

I give authorization for South New Milford Baptist Church of New Milford, PA, to complete a background check and have received and completed the necessary clearances required by the State of Pennsylvania to volunteer in this organization.

Applicants Signature: _____ Date: _____

Witness: _____ Date: _____

For office use only:

_____ *Risk prevention training completion date*
_____ *Child abuse clearance date*
_____ *Criminal background check date*
_____ *FBI clearance (if needed)*