



Workers with Minors Application

This application is to be completed by all applicants for any position involving the supervision or custody of minors. It will help our church family provide a safe and secure environment for all preschoolers, children, and youth who participate in our ministries and use our facilities.

What position are you applying for? _____
(Sunday School, Paid Nursery Worker, AWANA, VBS, Youth ministry, Camp counselor, Event Chaperone, Driver)

1. Personal information:

Name _____ Soc. Sec. # _____ Birthday _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email Address _____

Occupation _____ Marital Status _____

of Children _____ Ages _____ Emergency Contact _____

Do you have a valid driver's license? _____ Do you have a commercial driver's license? _____

License #: _____

Do you have any conditions that would limit your activities with children or youth? If yes, please explain: _____

On what date would you be available to begin? _____

Have you ever been investigated, charged with, indicted for, or pled guilty to an offense involving a minor?

yes no

If yes, please describe all convictions for the past ten years: _____

2. Church Activity:

When did you make your profession of faith in Christ? _____

When were you baptized? _____ Are you a member of our church? yes – date _____ No

If no, are you willing to become a member? yes no

Please state briefly your personal testimony of salvation: _____

List any gifts, training, education or other factors that have prepared you to work with children or youth:

Why do you want to work with children or youth at First Baptist Church:

List (name and address) other churches you have attended regularly during the past five years:

List all previous church work involving preschoolers, children, or youth:

Church Name	Address	Type of work Performed	Date
_____	_____	_____	_____
_____	_____	_____	_____

List all previous non-church work involving preschoolers, children, or youth:

Church Name	Address	Type of work Performed	Date
_____	_____	_____	_____
_____	_____	_____	_____

3. Personal References:

Do not use relatives. Please provide names of those who have observed your interaction with children.

- Name _____ Organization (if applicable) _____
 *Address _____ *City _____ *State _____
 *Zip _____ *Telephone _____
- Name _____ Organization (if applicable) _____
 *Address _____ *City _____ *State _____
 *Zip _____ *Telephone _____
- Name _____ Organization (if applicable) _____
 *Address _____ *City _____ *State _____
 *Zip _____ *Telephone _____

*Required

Please checkmark the following statements:

I agree with the purpose statement of First Baptist Church yes no
 I have read the Child Abuse Prevention Policy of First Baptist Church yes no

The information contained in this application is correct to the best of my knowledge. I hereby give First Baptist Church permission to contact my references and appropriate Governmental agencies. I authorize references or churches listed in this application to provide information (including opinions) they may have regarding my character and fitness for working with preschoolers, children, or youth. I release all such references from any liability for furnishing such evaluations, provided they do so in good faith and without malice. Should my application be accepted, I agree to be bound by the bylaws and policies of this church and to carefully read the foregoing release and know the content thereof and I sign this release on my own free act. This is a legally binding agreement which I have read and understand.

Signature _____ Date _____

For office use only

Application Status

- Received _____
- Interview _____
- Reference Check _____
- Background Check _____
- Placement in Ministry _____