



APPLICATION FORM MINISTRY 2 CHILDREN & YOUTH

This application is to be completed by any applicant for a ministry position within/involving an Evergreen Baptist Church of San Gabriel Valley ministry with minors. Your file will be confidentially maintained, although there may be circumstances where information may be provided on a "need to know" basis to individuals working with our ministry and to other individuals in order to evaluate your application and/or to comply with applicable legal requirements.

Please print clearly. Complete in black or blue ink only. Responses requiring an additional paper are to be typed.

Name: _____ Male Female

Address: _____ Home Phone: (____) ____ -- _____

_____ Cell Phone: (____) ____ -- _____

Email: _____ DOB: ____ / ____ / ____ Text Msgs OK? Yes No

Do you regularly attend Evergreen Baptist Church of San Gabriel Valley? Yes No

Are you a member of Evergreen SGV? Yes No

Have you been baptized? Yes No If yes, describe where and when: _____

If confirmed, when will you be able to begin serving? ____ / ____ / ____

Applying for: Church School Kids' Church Sports Ministries Youth Ministries MOPS

FOUNDATIONS OF FAITH

(attach answers to the application)

1. Write a one page personal testimony of your conversion experience. You may also include areas of current spiritual growth, future hopes, etc.
2. Prepare a statement of faith covering the following areas: God (Father, Jesus Christ and Holy Spirit), salvation and the Bible.
3. Why do you desire to serve as a leader to children and youth?

REFERENCES

One Evergreen SGV pastoral reference, one personal reference (non-relative) and one lay leadership reference (i.e. branch shepherd, small group leader, etc.). Please list your references. **You are responsible to distribute, collect and submit the completed reference forms with your application.**

Name	Phone	Email	Relationship
1.			
2.			
3.			

PERSONAL HISTORY

(Please check yes or no. If yes, please provide an explanation on a separate sheet of paper.
Note: A "yes" answer is not an automatic disqualification.)

1. Have you ever been accused of, arrested for, convicted of or pled guilty to a sexual, physical or criminal offense? Yes No
2. Have you ever been reported to a social services agency, law enforcement authority, child abuse registry or similar organization regarding abuse or misconduct involving a minor? Yes No
3. Have you ever been ticketed for reckless driving or driving under the influence? Yes No
4. Have you or are you using illegal drugs? Yes No
5. Have you ever been treated or hospitalized for alcohol or substance abuse? Yes No
6. Do you smoke cigarettes, cigars, pipes, chew tobacco, etc? Yes No
7. Do you have any concerns about circumstances or patterns in your life which may make it inappropriate for you to serve with children & youth? Yes No

STATEMENT OF RELEASE

(applies to all personnel files, including application, background check & references)

The responses provided in this application packet are complete, truthful and accurate. I hereby authorize Evergreen Baptist Church of San Gabriel Valley (hereunto referred too as "the Church") to make inquiries concerning my background in connection with evaluating the information I have provided on this form and in the application process, including a criminal records check. I hereby authorize all persons associated with me, including churches, employers, law enforcement agencies, licensing and social services agencies, to release any information contained in their files or records concerning me to the Church and its representatives.

In consideration of the receipt and evaluation of this application by the Church, I hereby release the Church and their directors, employees, agents, representatives and any other person or organization, including record custodians, that may release information concerning me, 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 inquiries concerning my background and any disclosures of information concerning me to the Church.

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 affirm that I will strictly comply with all policies and procedures of the church.

I have carefully read the foregoing release and know the contents of it, and I sign this release of my own free and voluntary will.

Signature

Date

Name (please print)

For office use only: Date Received: _____ Processed By: _____ Status: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved
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