

EMMANUEL BAPTIST CHURCH FAMILY MINISTRIES APPLICATION FORM

This Volunteer Ministry Application Form is extensive. Our desire is to reduce the risk of abuse and accusation within our church ministries. We believe this information is necessary to protect our children and our volunteers. If you have any questions about this form, please feel free to discuss the contents with your ministry supervisor. Thank you for your cooperation.

- I have attended Emmanuel Baptist Church for at least 6 months.
- I have met with a Family Ministries Staff Member

your details

Full Name: _____ Male/Female: _____

Address: _____

_____ Postal Code: _____

Phone Number (Home): _____ (Cell): _____

Date of Birth: _____ Driver's License: _____

Occupation: _____

Email Address: _____

Emergency Contact & Phone #: _____

How long have you been part of a church community? _____

(Please include a list of churches you have attended or worked with in the last 5 years if relevant.)

Are you currently a regular attender at Emmanuel Baptist Church?: _____

Have you been baptized?: _____

If not, would you be interested in attending a baptism class?: _____

Are you a member of Emmanuel Baptist Church?: _____

If not, would you be interested in attending a membership class?: _____

Have you identified your spiritual gifts? Please list: _____

3. How do you think participating in Family Ministries could help you grow in your Christian walk? In what ways can Family Ministries support you in your development and growth?

4. Is there anything in your personal history that may be flagged in your criminal records check that could limit your involvement in Family Ministries? If so, please explain.

5. Is there anything that may hinder you from fully engaging in Family Ministries such as physical limitations, lifestyle choices, or a history of personal abuse in any form? If so, please explain.

references

Please provide the names of three adult individuals, excluding relatives, who could provide a reference for you. Include at least one reference from outside the church.

1. Name of Reference: _____

Address: _____

Phone Number: _____

Email: _____

In what capacity known? _____ How long? _____

2. Name of Reference: _____

Address: _____

Phone Number: _____

Email: _____

In what capacity known? _____ How long? _____

3. Name of Reference: _____

Address: _____

Phone Number: _____

Email: _____

In what capacity known? _____ How long? _____

Volunteer Covenant

I hereby give Emmanuel Baptist Church permission to contact persons named as references to ascertain my suitability for volunteer ministry. I release all references from liability for any damage that may result from the evaluation.

I give Emmanuel Baptist Church consent to verify the information provided herein and to contact the references listed. I waive any right to confidentiality, and of any right to pursue damages against the church caused by the reference's response.

I also grant my permission for Emmanuel Baptist Church to perform a police records check for purposes of my protection against any false allegations and for the protection of those I serve. I consent to such an investigation with the understanding that the results will be kept in strict confidence. I agree to adhere to the protection policies as adopted by this church.

I understand that if my character or morals are deemed by church leadership to be inappropriate and/or criminal at any time during my volunteer service, Emmanuel Baptist Church will be entitled to terminate my assistance without expressed cause or prior notice regardless of any oral or written statement by Emmanuel Baptist Church prior to, at, or following the date of volunteer service.

I understand that Emmanuel Baptist Church is responsible for the welfare of any person or persons entrusted to my care in my capacity as a volunteer. I will cooperate fully with the staff in the fulfillment of my duties and will keep all information I encounter in my role as a volunteer confidential.

If at any time I find that for any reason I am unable to support the policies, procedures, or doctrine of Emmanuel Baptist Church I will gracefully and quietly resign my volunteer position. If my supervisors find that I am in conflict with any of the policies, procedures, or doctrines and we are not able to resolve the issue I will gracefully and quietly agree to resign my volunteer position.

I hereby acknowledge that, to the best of my knowledge, the information contained in this application for volunteer ministry is true and correct.

Signature of Applicant: _____

Printed Name: _____ Date: _____

Signature of Parent/Guardian (if applicant is under 18): _____

Printed Name: _____ Date: _____

Information received is confidential and is being gathered for the purposes of screening ministry personnel and placing them into ministry with vulnerable persons. The information gathered here will be used for the purposes for supporting the ministries at Emmanuel Baptist Church.

Upon completion please return this application form to Family Ministries Staff.