

Today's Date: _____

**Arvada Covenant Church
Children's Ministries
Youth Application Form**

All information obtained will be kept confidential and will only be used to determine if the applicant is qualified to volunteer in the Children's Ministry at ACC.

Full Name: _____ **Birthdate:** _____

Street Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **Phone Number:** _____

School Attending: _____ **Grade:** _____

Circle One: Male Or Female E-Mail Address: _____

Please answer the following questions:

Give a brief testimony of your salvation experience:

What specific gifts, talents, interests and experience do you have in working with children?

Why do you want to serve in Children's Ministry? _____

Do you attend Arvada Covenant Church? _____

If no, where do you attend? _____

Have you ever been convicted of or plead guilty or no contest to any criminal offense of any kind? _____

If yes (other than a minor traffic offense), please provide all details: _____

Today's Date: _____

Have you ever participated in, or been accused, convicted or plead guilty or no contest to child abuse, molestation, or any improper conduct involving a minor? _____

If yes, please explain: _____

List three personal references, (not relatives but who are adults) who can describe your spiritual qualities

1. Name: _____ **Phone Number:** _____

Street Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **Relationship:** _____ **Years Known** _____

2. Name: _____ **Phone Number:** _____

Street Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **Relationship:** _____ **Years Known** _____

3. Name: _____ **Phone Number:** _____

Street Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **Relationship:** _____ **Years Known** _____

Please answer the following questions:

Will you commit to being prepared for your areas of responsibility and to being "on time"? _____

Will you strive to be a Christian role model in all areas of dress and conduct? _____

Will you make the children your primary focus of attention and not your peers? _____

Will you attend training meetings? _____

Do you understand that negligence in any of these areas could result in your being dismissed from service? _____

I am aware that my child is applying to be a youth volunteer at Arvada Covenant Church and grant my permission to do so.

Parent Signature: _____ **Date:** _____

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 you any information that they may have regarding my character and fitness for children and/or youth work, and I release all such references from liability for any damage that may result from furnishing such evaluations to you.

Applicant's Signature: _____ **Date:** _____

Today's Date: _____



Arvada Covenant Church
Disclosure to Volunteer or Employment Applicant
Regarding Procurement of a Criminal Background Report

In connection with your application for employment or for a volunteer position at Arvada Covenant Church, we may procure a criminal background check and/or DMV report on you as part of the process of considering your candidacy. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment or volunteer position, before making the adverse decision, we will provide you with a copy of the report and discuss the results with you personally.

Please be advised that we may also obtain an investigative report including information as to your character, general reputation, personal characteristics, and mode of living. This information may be obtained by contacting your previous employers or references supplied by you. Please be advised that you have the right to request, in writing, within a reasonable time, that we make a complete and accurate disclosure of the nature and scope of the information requested. Such disclosure will be made to you within 5 days of the date on which we receive the request from you or within 5 days of the time the report was first requested.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies such as the one used by Arvada Covenant Church to perform criminal background checks and obtain DMV reports. You will be given a summary of these rights together with this document.

By your signature below, you hereby authorize us to obtain a criminal background report, a DMV report and/or an investigative report about you in order to consider you for employment or for a volunteer position. This authorization is not valid for a consumer credit history report.

A copy of your current driver's license must be attached to this form.

Applicant's Full Legal Name: _____
(Please Print)

Applicant's Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: ____/____/____

Gender: Male Female

Signature: _____

Today's Date: ____/____/____

Circle the ministry you are applying for:

MOPS

Children's

Jr. and/or Sr. High

Apartment Ministry