



# NEW LIFE

BIBLE FELLOWSHIP

## Children's Ministry Volunteer Application

Name \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street City Zip

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_

Marital Status (circle one) Single Married Separated Divorced

### Relevant Ministry Information

How long have you attended New Life Bible Fellowship? \_\_\_\_\_

How did you hear about this position?

Present Church Member? (Circle one) Yes No

Are you a Christian? (Circle one) Yes No

Have you been baptized? (Circle one) Yes No

What are your Spiritual Gifts? \_\_\_\_\_

What are your Skills and Talents? \_\_\_\_\_

Briefly describe how and when you became a Christian:

\_\_\_\_\_  
\_\_\_\_\_

Briefly describe your relationship to God right now:

\_\_\_\_\_  
\_\_\_\_\_

If you could do anything for God without fear of failure, what would it be?

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### **Children's Ministry Information**

Children's Ministry Position applying for \_\_\_\_\_

Have you ever worked in a Children's Ministry Program before?    Yes    No

If yes, where are for how long? \_\_\_\_\_

What age group did you work with? \_\_\_\_\_

What causes you to desire to work with children here at New Life?

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How many hours a week can you devote to ministry? \_\_\_\_\_

Are you currently involved in another ministry or volunteer position?    Yes    No

If yes, what and where? \_\_\_\_\_

Have you taken any courses or received any training that would better equip you for children's ministry? (I.e. CPR, first aid, seminars)

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Are there any medical problems you have that we should be aware of?

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### **References**

Please provide the name and phone number of 2 references

1. \_\_\_\_\_

2. \_\_\_\_\_

## Legal Questionnaire

1. Have you ever been convicted of a criminal offense (felony or misdemeanor, except for minor traffic violations)? You will need to answer "Yes" if you have entered into a plea agreement, including a deferred sentence or deferred judgment arrangement, in connection with a criminal charge. **YES NO**

*If you have been convicted of such an offense, please attach a statement or explanation, including nature of offense, date, court where conviction was entered, and any other relevant information.*

2. Have you ever been arrested for or charged with a sexual offense, offense relating to children, or crime of violence (that is not covered in question 1 above)? **YES NO**

*If you have been arrested for or charged with such an offense, please attach a statement of explanation, including nature of offense charged, date, law enforcement agency making the charge, and any other relevant information.*

3. Have you ever been reported to a social services agency, law enforcement authority, child abuse registry, or similar organization regarding abuse or misconduct involving children? **YES NO**

4. Have you ever been subjected to expulsion, reprimand, or other discipline by a church, denomination, or other religious organization? **YES NO**

5. Have you ever been the subject of a civil lawsuit involving sexual misconduct, sexual harassment, or other immoral behavior or conduct, involving adults or children? **YES NO**

6. Have you ever been the subject of a complaint or disciplinary proceeding against a professional license or other license held by you, including but not limited to a license to provide child care or similar services? **YES NO**

7. Have you ever been the subject of any disciplinary action, transfer, or dismissal, or been named as a defendant in a civil or criminal lawsuit, as a result of an accident or mishap involving children? **YES NO**

8. Have you ever been subject to any disciplinary action (including discharge) or investigation by a church, religious or other organization, or by an employer? **YES NO**

*If your answer to any of the questions 3-8 is "Yes", for each positive response please provide the following information:*

- a) Date and complete description of the circumstances*
- b) Name and address of the church, employer, or other organization involved*
- c) Name and telephone number of a person familiar with the circumstances*

I certify that all information provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration, and may result in my removal if discovered at a later date.

Signature \_\_\_\_\_ Date \_\_\_\_\_



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**Permission form to run a background screening for volunteer positions in New Life's Children's Ministry**

In connection with your volunteer position in our Children's Ministries, we may procure a report on you from Group's LexisNexis Screening Solutions as a part of the process of considering you as a volunteer.

By your signature below, you hereby authorize New Life to obtain a criminal background check. We will provide a copy of this report for you at your request.

Applicant Name: \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number and State: \_\_\_\_\_

Name as it appears on Driver's License: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

NOTE: Date of Birth information is used ONLY by Group's LexisNexis Screening Solutions for verification of identity and is not used of any purpose by New Life.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_