

# VOLUNTEER HELPER APPLICATION FORM

In our desire to reduce the risk of abuse within our church ministries, we believe this information is necessary to protect our children, our youth and our volunteers and to effectively place our volunteers in ministry positions. Thank you in advance for your partnership.

## APPLICANTS INFORMATION

Name:					
Address:					
City:		Province:		Postal Code:	
Main Phone:		Alternate Phone:		Email:	
Parents/guardian Name:				Phone:	
Are your parents/guardians supportive of your ministry involvement?		YES/NO	If no, please explain below:		
Hobbies, interests or skills:					
Volunteer experience and part-time jobs					

## SPIRITUAL HISTORY

Do you attend church regularly? (2 or more services a month)		YES/NO	How long have you attended?	
Church Name	Address		Phone	
When did you accept Christ as your Saviour?				
In a brief paragraph, please describe what your faith means to you.				

## MINISTRY QUESTIONNAIRE

Describe why you would like to be part of our Children's Ministry Team.		
What strengths or assets would you bring to our Children's Ministry Program?		
What areas of concern do you have in working with children?		
Do you see yourself as a team player?	YES/NO	Please explain
Please list the area of Ministry in which you would like to serve		

## PERSONAL REFERENCES

(Not a relative, over the age of 18, employers only if work with children, pastors, people from church who know you well, people who know how you interact with children)

Name:					
Address:					
City:		Province:		Postal Code:	
Home Phone Number:		Cell Number:			
Relationship to you:					

Name:					
Address:					
City:		Province:		Postal Code:	
Home Phone Number:		Cell Number:			
Relationship to you:					

## RELEASE OF INFORMATION AND DECLARATION OF INTENT

I hereby give First Baptist Church consent to verify the information provided by me in this Volunteer Helper Application Form and to contact the references to obtain and verify any information from them (and any other persons that FBC determines might be able to provide relevant information) that may be relevant to my application.

I further grant First Baptist Church permission to perform an internet search on me and to review and consider any information found about me on the Internet.

I understand that if First Baptist Church approves my volunteer application and later determines, in its discretion, at any time that I am not suitable for volunteer service at FBC or for the volunteer position for which I am applying, FBC may terminate my volunteer service or volunteer position for any reason without advance notice.

If First Baptist Church approves my application for a volunteer position, I will sign any documents that the FBC requires and will at all times cooperate fully with the staff of the church in the fulfillment of my duties and will keep all confidential information I encounter in my role as a volunteer, confidential.

If at any time I determine that for any reason I am unable to support or adhere to or follow the policies, procedures, constitution, or doctrine of First Baptist Church, I will inform FBC and will resign my volunteer position.

I hereby acknowledge that, to the best of my knowledge, the information contained in this Volunteer Helper Application Form is true and correct.

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

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Information received is confidential and is being gathered for the purposes of considering your application for a Volunteer Helper ministry with First Baptist Church and for determining what, if any FBC ministries, you may be suited for in future.

## APPROVALS

Position	Date	Name	Signature
Chair of Deacons			
Pastor			