**Appendix B**

**APPLICATION TO WORK/VOLUNTEER WITH CHILDREN AND/OR YOUTH**

Caldwell United Methodist Church

All 4 pages of this application are to be completed by all persons (volunteer or compensated) who desire to work with children or youth in our church’s ministries. This application form is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and for those who work with them.

**Personal Information**

Date of application: \_\_\_\_/\_\_\_\_/ 20\_\_\_\_

Name of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle)

Former Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if applicable): (Last) (First) (Middle)

Present Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

(City) (State) (Zip)

Home phone: (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

Cell phone (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

Other phone number: (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

How long have you lived at the above address?

If less than one year, provide all previous addresses for the past five years:

Please indicate the type of youth or children’s work you prefer:

Why do you want to serve in this position?

Please indicate the date you would be available to begin work:

What is the minimum length of commitment you can make?

Our church has an open door policy which means that a parent, volunteer, or church staff can visit/observe at any time. Are you comfortable with this atmosphere?

Our church encourages the use of two teacher/leaders for all children/youth activities. Are you comfortable with team teaching?

Have you ever been charged with, convicted of, or plead guilty or no contest to a crime against children or other persons?

**🗆**No **🗆**Yes (If yes, please explain – use back of form or attach a separate page, if necessary)

Have you ever committed any act of child abuse or sexual misconduct against a minor?

**🗆**No **🗆**Yes (If yes, please explain – use back of form or attach a separate page, if necessary)

**CHURCH HISTORY AND PRIOR CHILD/YOUTH WORK**

What is the name of your current church: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

How long have you been attending this church?

List the names and addresses of other churches you have attended regularly during the past five years:

List all previous church work involving children/youth (list each church’s name and address, type of work performed, and dates.

List all previous non-church work involving children/youth (list each organization’s name and address, type of work performed, and dates)

List any gifts, callings, training, education, or other factors that have prepared you for working with children or youth:

**References**

Please list three persons who have known you for at least three years and who are familiar with your character, particularly as it relates to supervision of children and youth. None of the references may be a relative.

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

(City) (State) (Zip)

Daytime phone: (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_ Evening phone (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

Length Of time you have known this reference:

Relationship to this reference:

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

(City) (State) (Zip)

Daytime phone: (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_ Evening phone (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

Length Of time you have known this reference:

Relationship to this reference:

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

(City) (State) (Zip)

Daytime phone: (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_ Evening phone (\_\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

Length Of time you have known this reference:

Relationship to this reference:

**APPLICANT’S AUTHORIZATION AND RELEASE**

The information contained in this application is correct and complete to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for work with children or youth. In consideration of the receipt and evaluation of this application by (Name of Church), I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, 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 compliance or any attempts to comply, with this authorization.

Should my application be accepted, I agree to abide by all provisions of the Caldwell United Methodist Church Child Protection Policy and Procedures in effect when I am accepted and as subsequently updated or modified. I will also live by the understanding that, as a person of authority, it is my responsibility to avoid inappropriate behavior with or the abuse of any children or youth in my care.

I further state that I HAVE CAREFULLY READ THE FOREGOING AUTHORIZATION AND RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN IT AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

Applicant’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_/\_\_\_\_\_/ 20\_\_\_