Last Name Background √ Paid Childcare Youth Assist. Application

For Office Use

New Covenant Bible Church (NCBC) Youth Volunteer Application For Children's Ministry

Name:	Home Phone			Cell Phone					
Address:	City:				Zip Code:				
Birthdate (month/day/year)	Best way to conta	nct you	•,	Home Phone	Cell Phone	Text	Email		
Email Address:	Schoo Atten				Grad	e:			
Parent/Guardian 1:									
Parent/Guardian 2:									
Do you regularly attend NCBC?		Yes	No		If yes, since wha	it year:			
Are your parents members of New Coven	ant Bible Church?		Yes	No					
Would you consider becoming a member	?		Yes	No					
List three personal references, especially those who would know of your experiences, behavior or background with children. Preferably at least one who is on staff at NCBC. <u>Do not include relatives.</u> (Please include all information, so we may expedite the process.) Providing their email is preferred.									
Name:			Pho	ne:					
EMAIL ADDRESS PREFERRED	:								
Address	City:		Stat	e:	Zip:				
Known how long:	Relationship:								
Name:			Pho	ne:					
EMAIL ADDRESS PREFERRED	:								
Address	City:		Stat	e:	Zip	:			
Known how long:	Relationship:								
Name:			Pho	ne:					
EMAIL ADDRESS PREFERRED	•								
Address	City:		Stat	e:	Zip:	:			
Known how long:	Relationship:								
If applicable, list the name of your church	n previously attended								
Name:		Phone:							
EMAIL ADDRESS PREFERRED	•								
Address	City:			State:	2	Zip:			
How long did you attend:	Pastora Contac								

Do you have a personal relationship with Jesus as your Lord and Savior? If yes, please share your experience: Yes No							
Have you worked with children before? If yes, please explain	Yes No						
What areas, groups, and/or age brackets do you want to work with in Children's Ministry? Please check all that apply: Specifically:	One time Event Only State event at left:						
Sunday Children's Wednesday Children's Other Children's Events	-						
Have you ever been accused, rightly or wrongly, or convicted of any type of sexual or physical abuse, neglect, or maltreatment of a child, family member, or any other individual? If yes, please explain: Or, check here to discuss with a member of NCBC's Equipping Staff.	Yes No						
Have you ever been charged with or convicted of any criminal act including felonies or misdemeanor excluding minor traffic violations? If yes, please explain (and include state, county and year of charged and/or conviction). Or, check here to discuss with a member of NCBC's Equipping Staff.							
Is there any physical or mental condition that might limit or in anyway impact your ability to volunt or that NCBC should know about? If yes, please explain: Or, check here to discuss with a memb NCBC's Equipping Staff.							
Could you refrain from smoking or drinking before and while working with children?	Yes No						
Could you refrain from smoking or drinking before and while working with children? Is there any other information relevant to your suitability to serve as a volunteer in the children's Mi that NCBC should know? If yes, please explain: Or, check here to discuss with a member of NCBC's Equipping Staff.							

I hereby certify that to the best of my recollection and knowledge, the information on this Application is accurate and has no material omissions. I understand that I am applying to be an unpaid volunteer and not an employee.

I authorize representatives of NCBC to take whatever action it deems appropriate in its sole discretion to verify the information on this form and my suitability as a volunteer, including contacting the references listed above and any others including government agencies. I further authorize and release my references, past and present employers, and others to provide information to NCBC about my suitability to serve as a volunteer.

Signature	Date	