

(References Sent)

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

(Answers to the following do not necessarily qualify or disqualify you as a volunteer. They are used to help us best place you in ministry.) If additional space is required, please use the attached sheet.

	Last Name
	First Name
	Background ✓
	Paid Childcare
	Nursery
	Classroom
	Application
Dates	Ref. ____

Name:		Home Phone:	
Cell Phone:	Work Phone:	Can you receive calls at work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:		City:	Zip Code:
Birthday (month/day)		Best way to contact you? <input type="checkbox"/> Home Phone <input type="checkbox"/> Cell Phone <input type="checkbox"/> Text <input type="checkbox"/> E-mail	
Email Address:			
Marital Status:			
<input type="checkbox"/> Never Married		<input type="checkbox"/> Married	
<input type="checkbox"/> Widowed		<input type="checkbox"/> Separated	
		<input type="checkbox"/> Engaged	
		<input type="checkbox"/> Divorced	
Do you regularly attend NCBC?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		If yes, since when: _____	
Are you a member of NCBC?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Would you consider becoming a member?		<input type="checkbox"/> Yes <input type="checkbox"/> 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. Do not include relatives. (Please include all information, so we may expedite the process.)			
Name:		Phone:	
EMAIL ADDRESS PREFERRED:			
Address:		City:	State: Zip:
Known how long:		Relationship:	
Name:		Phone:	
EMAIL ADDRESS PREFERRED:			
Address:		City:	State: Zip:
Known how long:		Relationship:	
Name:		Phone:	
EMAIL ADDRESS PREFERRED:			
Address:		City:	State: Zip:
Known how long:		Relationship:	
If applicable, list the name of your church previously attended.			
Name:		Phone:	
EMAIL ADDRESS PREFERRED:			
Address:		City:	State: Zip:
How long did you attend?		Pastoral Contact:	

For Office Use Only

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 ministry?

Please Check all that apply: Specifically: _____

- | | | |
|---|--|---|
| <input type="checkbox"/> Sunday Children's | <input type="checkbox"/> Wednesday Children's | <input type="checkbox"/> Other Children's Events |
| <input type="checkbox"/> Sunday Middle School | <input type="checkbox"/> Wednesday Middle School | <input type="checkbox"/> Other Middle School Events |
| <input type="checkbox"/> Sunday High School | <input type="checkbox"/> Wednesday High School | <input type="checkbox"/> Other High School Events |

One time Events Only
State event at left:

Sunday prefer: (circle)
9:30 | 11:05

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 misdemeanors, excluding minor traffic violations? If yes, please explain (and include state, county and year of charge and/or conviction). Or, check here to discuss with a member of NCBC's Equipping Staff. Yes No

Is there any physical or mental condition that might limit or in anyway impact your ability to volunteer or that NCBC should know about? If yes, please explain: Or, check here to discuss with a member of NCBC's Equipping Staff. Yes No

Could you refrain from smoking or drinking before and while working with children? Yes No

Is there any other information relevant to your suitability to serve as a volunteer in the children's Ministry that NCBC should know? If yes, please explain: Or, check here to discuss with a member of NCBC's Equipping Staff. Yes No

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** _____

(Please also complete the attached Volunteer Application Supplement)

New Covenant Bible Church
Volunteer Application Supplement

This information is being requested only for the purpose of conducting background checks.

Please print clearly

Full name (full first, middle, last) _____

Previous Name(s), if any: _____

Gender: _____ Male _____ Female

Date of Birth: _____



Please attach a current “head-shot” of yourself for our volunteer directory. Or, simply e-mail your picture to: Judy.Greeb@ncbc.church with your first and last name.

States and counties of residence for last 7 years:

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

Years: _____ State: _____ County _____

I hereby certify that to the best of my recollection and knowledge, the above information is accurate and complete. I authorize representatives of NCBC to conduct any and all investigations into my background that it deems necessary to verify my suitability to volunteer in the church’s ministries, including criminal background checks.

Signature: _____ Date: _____

