	erences S	Sent)
	Last Name	
	First Name	
	Background √	
	Paid Childcare	
•	Nursery	

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.

Name:	Home or Cell Pho	one:		
Cell Phone: Wo	rk one: Ca	an you receive	calls at work?	Yes No
Address: City		Zip Code:		
Birthday (month/day)	Best way to contact you?	Home Phone	Cell Phone Text	E-mail
Email Address:	, , ,		Thone	
Marital Status: ☐ Never Married ☐ Widowed	☐ Married ☐ Separated	□ Engag □ Divore		
Do you regularly attend NCBC?	Yes	No If y	yes, since what yes	ar:
Are you a member of NCBC?	Yes	No		
Would you consider becoming a member	Yes	No M	ember already	
List three personal references, especially with children. Preferably at least one who (Please include all	those who would know of your of some staff at NCBC. Do not information, so we may exp	ot include rela	atives.	ekground
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?	long did you attend? Pastoral Contact:			

Dates

Application

Ref.

Do you have a personal relationship with Jesus as your Lord and Savior? If yes, please share	your experie	ence: 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:		time Event ate event at	
** * * ======	- 5"	ate event at	icit.
☐ Sunday Children's ☐ Wednesday Children's ☐ Other Children's Events ☐ Sunday Middle School ☐ Wednesday Middle School ☐ Other Middle School Events			
Sunday High School Wednesday High School Other High School Events			
Have you ever been accused, rightly or wrongly, or convicted of any type of sexual or physical neglect, or maltreatment of a child, family member, or any other individual? If yes, please ex 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 misder excluding minor traffic violations? If yes, please explain (and include state, county and year 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 dismember of NCBC's Equipping Staff.	cuss with a	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 childr Ministry that NCBC should know? If yes, please explain: Or, check here □ to discuss with a of NCBC's Equipping Staff.		Yes	No
I hereby certify that to the best of my recollection and knowledge, the information on this Application 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 discreti			
this form and my suitability as a volunteer, including contacting the references listed above and any agencies. I further authorize and release my references, past and present employers, and others to p about my suitability to serve as a volunteer.	others include	ling govern	ment
SignatureDate			

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, la	ast)			
Previous Name(s), if any:				
Gender:		Male	Female	
Date of Birth:				
Please attach a curr e-mail your picture to	o: Judy.Greeb@ncbo	yourself for our vo e.church with your fi	lunteer directory, rst and last name.	. Or, simply
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 complete. I authorize represer background that it deems nece including criminal background	ntatives of NCBC to ssary to verify my so I checks.	conduct any and all	investigations into	my
Signature:	Date: _			

If needed this page may be used for additional room in answering any question(s) on the Volunteer Application for Children's Ministries at NCBC.