



Meridian Baptist Church

Confidential Volunteer Application Form

This application is to be completed by all applicants for volunteer positions at Meridian Baptist Church. In addition to the application, all positions that involve supervision or custody of minors will need to complete our children's worker screening process. This will help our church family provide a safe and secure environment for children.

I would like to volunteer for:

Position desired _____ Hours Available _____

Personal

Last Name _____ First Name _____ Middle Initial _____
Present Address _____ Social Security # _____
City _____ State _____ Zip _____ Date _____
Email _____ Marital Status _____
Home Phone _____ Work Phone _____
Occupation _____

Do you have a current driver's license? No Yes: License number _____ State _____

Have you ever been charged with, indicted for, or pled guilty to an offense involving a minor? No Yes

If yes, please describe all convictions for the past five years. _____

Were you a victim of abuse or molestation while a minor? No Yes

- If you prefer, you may refuse to answer this question.
- You may discuss your answer in confidence with one of the ministers rather than answering on this form.
- Answering yes or leaving the question unanswered will not automatically disqualify you.

Church

When did you make your profession of faith in Christ? _____

When were you baptized? _____ List and gifts, callings, training, education, or other factors that have prepared you for this ministry. _____

Are you a member of this church? No Yes -- If yes, how long have you been a member? _____

1. If no, list your church membership contact information in the first church selection on the back of this form.
2. Please list other churches you have attended regularly during the past five years.
3. Include the type of work involving children that you performed.

Church History

- Church (Membership) Name _____ Dates of Service _____
Church Address _____ Church Phone _____
City/State/Zip _____
Ministry involved in: _____
- Previous Church Name _____ Dates of Service _____
Church Address _____ Church Phone _____
City/State/Zip _____
Ministry involved in: _____
- Previous Church Name _____ Dates of Service _____
Church Address _____ Church Phone _____
City/State/Zip _____
Ministry involved in: _____

References

Personal References (not former employers or relatives)

Name	Address	City/State/Zip	Phone
_____	_____	_____	_____
_____	_____	_____	_____

List all previous non-church work involving children. Attach additional sheet if necessary.

Organization	Address	City/State/Zip	Phone
_____	_____	_____	_____
_____	_____	_____	_____

Applicant Statement (Please initial each statement.)

- _____ The information contained in this application is correct to the best of my knowledge.
_____ I authorize references or churches listed in this application to provide information (including opinions) they may have regarding my character and fitness for working with children.
_____ I release all such references from any liability for furnishing such evaluations, provided they do so in good faith and without malice.
_____ I waive any right I may have to inspect references provided on my behalf.
_____ Should my application be accepted, I agree to be bound by the bylaws and policies of this church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.
_____ I further state that I have carefully read the forgoing release and know the content there of and I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

Applicant's Signature _____ Date _____
Witness _____ Date _____