



# Gate City Church Kid's Volunteer Application

*Confidentiality Statement: This application is to be completed by all Children's Ministry helpers within our church. All applications are processed formally to provide a safe and secure environment for those who participate in our programs and use our facilities.*

Date: \_\_\_\_\_ Name (Include Maiden Name): \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Birthdate: \_\_\_\_\_

\_\_\_\_ Male \_\_\_\_ Female Marital Status: \_\_\_\_\_ Spouses Name: \_\_\_\_\_

## **Christian Experience**

- **Please describe when and how you received Christ as your Lord and Savior:**

---



---



---



---

- **How long have you attended Gate City Church? \_\_\_\_\_**

- **List the names of other Churches you have attended regularly in the last 5 years:**

Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

- **What are your beliefs about the following?**

- Nature of God: \_\_\_\_\_

---

- Person and work of Jesus Christ : \_\_\_\_\_

---

- Sin and Salvation: \_\_\_\_\_

---

- The Bible: \_\_\_\_\_

---

- Holy Spirit: \_\_\_\_\_

---

**Lifestyle Questions**

- Do you have any limitations or conditions preventing you from performing certain types of activities relating to children’s ministry? \_\_\_ Yes \_\_\_ No. If yes please explain.  
\_\_\_\_\_

- Have you ever been accused or convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor? \_\_\_ Yes \_\_\_ No. If yes please explain. \_\_\_\_\_  
\_\_\_\_\_

- **Where would you enjoy serving the most?**

\_\_\_ Registration            \_\_\_ Security                    \_\_\_ Production  
\_\_\_ Music (sing/play)    \_\_\_ Small Group Leader       \_\_\_ Prep Team  
\_\_\_ Teach                    \_\_\_ Host Team

- **Please specify the ministry area were you desire to serve in.**

\_\_\_ First Look Nursery        (10 months – 2 years)  
\_\_\_ First Look 1                (2 – 3 years)  
\_\_\_ First Look 2                (4 – 5 years)  
\_\_\_ 252 Basics 1                (Grades 1 – 3)  
\_\_\_ 252 Basics 2                (Grades 4 – 6)  
\_\_\_ XP 3                            (Grades 7 – 8)

- **What do you feel your spiritual gifts are?** \_\_\_\_\_

- **Do you have any prior children’s ministry experience?** \_\_\_ Yes \_\_\_ No

- **How often are you available? (Please explain how many services on a given you are available and how many Sundays in a month you can serve)**  
\_\_\_\_\_

- **Personal References (No employees or relatives)**

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

**Applicant’s Statement**

The information I have given in this worksheet is correct and complete to the best of my knowledge. I agree that false information of significant omissions may disqualify me from further consideration for service and may be considered justification for dismissal if discovered at a later date.

I authorize Gate City Church to contact any reference or churches listed on this application or otherwise available to give you information (including opinions) that they may have regarding my character and fitness for child/youth work. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive my right that I may have to inspect references provided on my behalf.

I agree to be bound by the policies of Gate City Church and to refrain from unscriptural conduct in the performance of my services on the behalf of the Church.

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**Leading children to know, love, and follow Jesus**



# **BACKGROUND CHECK AUTHORIZATION**

## **FCRA NOTICE AND ACKNOWLEDGMENT**

**IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT**

### **NOTICE REGARDING BACKGROUND INVESTIGATION**

\_\_\_\_\_ **("Company Name")** may obtain information about you from a consumer reporting agency for employment/volunteer purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include, but is not limited to: employment and education verifications; social security number verification; criminal and civil court records; personal interviews; driving records; and/or any other public records or any other information bearing on your character, general reputation, personal characteristics and trustworthiness. These reports may be obtained at any time after receipt of your authorization and, if you are selected, throughout your affiliation with the Company. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. The report will be generated by **ChristianBackgroundchecks.com** (1200 South Outer Road, Blue Springs, MO 64015/816-228-5255) or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are selected, throughout your affiliation with the Company to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

### **ACKNOWLEDGMENT AND AUTHORIZATION**

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION (above) and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT (separate document) and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am selected, throughout my affiliation with the Company. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **ChristianBackgroundchecks.com**, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

**Minnesota and Oklahoma applicants only:** Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. [  ]

**Applicants of New York Employers only:** I acknowledge that by signing below, I have also received a copy of Article 23-A of the New York Correction Law, in compliance with Article 25 Section 380-g of the New York General Business Law.

**California applicants only:** By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law. [  ]

<b>Full Name</b>	First	Middle	Last
<b>Maiden Name, Previous Names, or Aliases Used:</b>	First	Middle	Last
	First	Middle	Last
	First	Middle	Last
<b>Social Security Number:</b>	<b>Date of Birth:</b>	<b>Driver's License/ID State:</b>	<b>Driver's License/ID Number:</b>

### **Please provide ALL residential addresses for the past seven (7) years.**

Current Address:	From
Previous Address:	From/To
Previous Address:	From/To
Previous Address:	From/To
Previous Address:	From/To
Previous Address:	From/To
Previous Address:	From/To
Previous Address:	From/To

<b>Contact Telephone Number:</b>	Check here if there are more addresses you have lived at in the last 7 years. <input type="checkbox"/>
----------------------------------	--

<b>SIGNATURE:</b>	<b>DATE:</b>
-------------------	--------------