

What type of work with children, youth or other ministry are you considering? _____

On what date would you be available? _____

Minimum length of commitment? _____

Have you any conditions preventing you from performing certain types of activities in the position for which you are considering? (i.e. if working in the preschool department, are you able to lift toddlers?)

Please circle one: **Yes** **No** If Yes, please explain... _____

CONFIDENTIAL INFORMATION

In order to provide a safe and secure environment for our children and youth, we believe it is necessary to include the following questions as part of our application process. All information will be kept strictly confidential by the Children's Ministry Department. (However, police may access this information under warrant if requested.) Answering yes to any of the questions may not necessarily preclude your involvement in the ministry. Thank you in advance for your understanding.

1. Are there any circumstances in your lifestyle or background that would call into question your ability to work with children or youth? (e.g. pornography, use of illegal substances, etc.) **Yes** **No**
2. Have you ever been convicted for the use or sale of illegal drugs? **Yes** **No**
3. Have you ever been through treatment for alcohol or substance abuse? **Yes** **No**
4. Have you ever been convicted of a criminal offense? **Yes** **No**
5. Have you ever been arrested or convicted for any abuse related crimes? **Yes** **No**
6. Have you ever been the subject of a civil lawsuit involving sexual misconduct, sexual harassment or other immoral behavior or conduct involving children, youth or adults? **Yes** **No**
7. Have you ever been the subject of any disciplinary action, transfer or dismissal, or been named as a defendant in a civil or criminal lawsuit as a result of a mishap involving a minor? **Yes** **No**
8. Have you ever been subjected to expulsion, reprimand or other discipline by a church, denomination or other religious institution? **Yes** **No**
9. Have you ever been the subject of any disciplinary action (including discharge) or investigation by a church, religious or other organization, or by an employer? **Yes** **No**
10. Do you have any health concerns of which we should be aware (e.g. medical or other) **Yes** **No**

If you have answered yes to any of the above questions, please explain here or attach a separate sheet:

SPIRITUAL HISTORY

Are you a Christian? **Yes** **No**

When did you accept Jesus Christ as your personal Savior? _____

Have you been baptized? **Yes** **No**

If yes, when and where? _____

Are you a member of Gateway Church? **Yes** **No**

If not, are you willing to attend a baptism/membership seminar? **Yes** **No**

How long have you attended Gateway Church? _____

Do you regularly attend 2 or more services a month? **Yes** **No**

Please list other churches you have attended regularly during the last five years (*include name and address*).

<u>Name of Church</u>	<u>Dates Attended</u>	<u>Address/Phone/Contact Person</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

In a brief paragraph, please outline your spiritual journey. Have you taken any courses or received any training that would equip you for ministry? What abilities or experiences do you bring to this ministry (i.e. gifts, talents, skills)? If you have identified your spiritual gifts, please list them.

Check **all of the ministry positions listed below in which you have personal experience.**
Circle **the ones which you are interested in (experience is not necessary).**

- | | | |
|---|--|---|
| <input type="checkbox"/> Preschool Ministry | <input type="checkbox"/> Drama (acting or directing) | <input type="checkbox"/> VBS/other outreach |
| <input type="checkbox"/> Large Group Teacher | <input type="checkbox"/> Kids' Worship leader | <input type="checkbox"/> Youth groups |
| <input type="checkbox"/> Small Group Leader | <input type="checkbox"/> Special Events | <input type="checkbox"/> Sound/Multimedia |
| <input type="checkbox"/> Small Group Apprentice | <input type="checkbox"/> Games | <input type="checkbox"/> Small Group Resource |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Crafts | <input type="checkbox"/> Décor/Atmosphere |
| <input type="checkbox"/> Adult Small Group leader | <input type="checkbox"/> Nursery | <input type="checkbox"/> Other: _____ |

REFERENCES

Please provide the names of three individuals, excluding relatives, who could provide a reference for you. Include at least one reference from outside the church.

Name	Mailing Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

RELEASE OF INFORMATION AND DECLARATION OF INTENT

I will:

- 1) abide by the decisions of my church;
- 2) regularly attend church services;
- 3) teach and live according to *Biblical principles* and according to the doctrinal statement of Gateway Church.

I hereby give Gateway Church permission to contact any references or churches listed in this application for any information regarding my character and to ascertain my suitability for volunteer ministry. I release all such references from liability for any damage that may result from furnishing such evaluations to you.

I also grant my permission for Gateway Church to perform a personal criminal record check and/or a Child Abuse Registry check, if deemed necessary, for purposes of my protection against any false allegations and for the protection of those I serve. I consent to such an investigation with the understanding that the results will be kept in extreme confidence. I agree to adhere to the protection guidelines as adopted by this church.

I understand that if my character or morals are deemed inappropriate and/or criminal at any time during my volunteer service, Gateway Church will be entitled to terminate my assistance without expressed cause or prior notice regardless of any other oral or written statement by Gateway Church prior to, at, or following the date of volunteer service.

I understand that Gateway Church is responsible for the welfare of any person or persons entrusted to my care, and thus I will cooperate fully with the staff in the fulfillment of my duties and will keep all information I encounter, in my role as a volunteer, confidential. If at any time I find that for any reason I am unable to support the policies, procedures or doctrine of Gateway Church, I will gracefully and quietly resign my volunteer position. If my supervisors find that I am in conflict with any of the policies, procedures or doctrines and we are not able to resolve the issue, I will gracefully and quietly agree to resign my volunteer position.

I hereby acknowledge that the information contained in this application for volunteer ministry is correct to the best of my knowledge. I have read, understand and agree to abide by and adhere to Gateway Church's Child Protection Policy.

Name of Applicant (please print)

Name of Witness (please print)

Signature of Applicant

Signature of Witness

Date

Date