

Volunteer Application

Children's and/or Youth Ministries
Epiphany Lutheran Church

Thank you for your interest in serving in a ministry of Epiphany Lutheran Church and for filling out this application. It is to be filled out by any person at Epiphany involved in the supervision of minors to help the church provide a safe, Christ-centered environment for all of our children and youth. THANK YOU !

I. Personal Information:

Name _____ Date of Birth _____

Current Address _____ Home Phone _____

City _____ State _____ Zip _____

Occupation _____ Work Phone _____

Social Security # _____ Driver's License # _____

Marital Status _____ Spouse's Name _____

II. Church History & Prior Children/Youth Work:

1. Are you a member of Epiphany Lutheran Church? _____ How long? _____

2. Why do you want to serve in Children's/Youth Ministry?

3. In which Children's/Youth Ministry and with what age do you want to serve?

4. What kind of ministry (church name and location) have you previously been involved with?

5. List any gifts, training, or non-church work with children that you have.

6. What are your hobbies or interests?

7. Have you ever been indicted, convicted, or pleaded guilty to abuse of a child or any other crime involving a minor? _____ If yes, please explain...

III. Personal References: (Not Family Members or Epiphany Lutheran Staff)

Friend (Former Pastor if possible) _____ Phone # _____

Address _____

How do they know you? _____

Friend _____ Phone # _____

Address _____

How do they know you? _____

IV. Applicant's Statement:

Please initial each statement below, indicating that you have read each one carefully, then sign and date the application.

____ I, hereby authorize Epiphany Lutheran Church or its agent to obtain information from any person, church, firm, corporation, or any other entity concerning myself including, but not limited to, criminal records and character history. I further waive any right to inspect these references.

____ I further release, discharge and hold harmless Epiphany Lutheran Church and its agent and any party delivering information to Epiphany Lutheran Church and its agent as a result of this authorization, from any liability, claims, charges, costs or causes of action which I, my heirs, or executors may have as a result of the delivery, disclosure, or omission of any information in connection herewith.

____ My signature below indicates that all statements and representations made by me to Epiphany Lutheran Church are true, and I understand that my misrepresentation or omission of significant or substantive information will be sufficient cause for cancellation of my consideration for any position (paid or volunteer). I also understand that, while under consideration for a position I must notify the pastor or pastor's designee of any conviction or guilty plea within three working days.

____ Should I serve at Epiphany Lutheran Church, I hereby agree to submit to periodic checks of my background at the sole discretion of Epiphany or its agents.

____ I have carefully read the Epiphany Child Safety Handbook and agree to abide by the policies and behaviors as stated.

By signing this authorization I hereby acknowledge that I fully understand it and that I authorize the research of my background and the release of appropriate information and reports, as outlined above.

Signature _____ Date _____