



APPLICANT STATEMENT & RELEASE FORM

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give any information they may have regarding my character and fitness for children/youth work, and I release all such references from liability for any damage that may result from furnishing such evaluations to you. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

I hereby authorize Life! Church to perform a criminal background check (*including, but not limited to, sex offender record*) as per policy before volunteering with children under 18 at Life! Church. I further authorize that this background check may be performed as often as deemed necessary during the course of my volunteering.

Should my application be accepted, I agree to be bound by the policies of Life! Church, and to refrain from un-Biblical conduct in the performance of my services on behalf of Life! Church.

PLEASE PRINT CLEARLY

Applicant's Signature: _____ Date: _____

Applicant's Printed Name: _____

Full Home Address (*Including zip code; no P.O. Boxes, please*):

Social Security Number: _____

Date of Birth: _____

Witness: _____ Date: _____

PLEASE COMPLETE BOTH SIDES OF APPLICATION



**KIDS LIFE & AMPLIFY YOUTH VOLUNTEER
CONFIDENTIAL SCREENING APPLICATION**

Name: _____ Date: _____

Address: _____

Phone: _____ E-mail: _____

Age: _____ Date of Birth: _____ Gender: _____ Marital Status: _____

How long have you been attending Life! Church? _____

Have you made Jesus the Leader of your life? _____ If so, how long ago? _____

To your knowledge, are you in agreement with Life! Church's beliefs? _____

If not, explain: _____

Are you a Life! Church Partner? _____ If yes, how long? _____

Have you been convicted of a criminal offense (*excluding minor traffic violations*)? _____

If yes, please explain: _____

Do you use illegal drugs? _____ Consume alcohol in excess? _____

Have you ever been convicted of child molestation? _____

Have you ever been accused of child molestation? (*If yes, explain*) _____

Do you have any emotional, mental, or physical conditions that may hinder your participation or effectiveness? (*If yes, explain*) _____

List all previous experience involving children or youth, identifying location and type of work:

List any training, education, spiritual gifts or other factors that have prepared you to work with children/youth: _____

Personal References (*no relatives; print clearly; include full mailing address*)

Name: _____

Relationship: _____

Address: _____

Telephone: _____

Name: _____

Relationship: _____

Address: _____

Telephone: _____

PLEASE COMPLETE BOTH SIDES OF APPLICATION