

# Vineyard Community Church Volunteer Application

Circle the areas for which you are applying

Nursery    Toddlers    Preschool    5y/o-1<sup>st</sup> grade    2<sup>nd</sup>-5<sup>th</sup> grade

Date \_\_\_\_\_

Name \_\_\_\_\_

**S.S.#** \_\_\_\_\_    **Date of Birth (m/d/y)** \_\_\_\_\_  
(Both are needed for background check)

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_    Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_    Email \_\_\_\_\_

How long have you attended the Vineyard? \_\_\_\_\_

Are you a member of the Vineyard Community Church? \_\_\_\_\_

Do you attend a Home Group? If so, which one? \_\_\_\_\_

List (name, city, and contact information) other churches you have attended in the last three years \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List previous work experience in the area for which you are applying describing the roles you performed. If you require more space, please add another sheet:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any gifts, training, education, or other factors that have prepared you for this kind of ministry: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please explain why you are interested in serving in this area: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please give two personal references (not relatives)

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_

**Applicant's Statement of Integrity\***

**The following questions are very personal and of a sensitive nature.** We pray that you understand that these questions are not asked to cause you any shame or foster any feelings of condemnation. However, for the protection of the people of our community, we need to have some area of accountability for those who minister to them. If you don't feel comfortable filling out this form, but would rather talk with Pastor Randy or the pastor over the area for which you are applying, please let us know as soon as possible. Phone 841-3510

***Marsha Kiel - Children's Ministry Director***

**\*All information contained in this application will remain confidential.**

***In the past 3 years***, have you been involved in or are currently struggling in areas of sexual immorality? (e.g., pornography, sex outside of marriage, homosexuality) \_\_\_\_\_

Have you ***ever*** been involved in child molestation or been tempted in this area? \_\_\_\_\_

If you answered yes to either of the above questions, please explain how long you have been free from this activity \_\_\_\_\_

\_\_\_\_\_

Are you ***presently*** struggling with an addiction or any other issue that might make it inappropriate for you to be in the direct care of children? \_\_\_\_\_ Is so, please talk to a staff member so that we can provide you with resources to help you.

The information contained in this application is correct and complete. Since ministry with children requires the highest degree of integrity and accountability, I (1) authorize any person or organization in this application to render written or oral evaluation which frankly discusses my character and fitness; (2) release any such person or organization from liability incurred thereby; (3) waive any right to inspect such evaluations; (4) agree to refrain from unscriptural conduct (see 1 Timothy 3:1-13); (5) authorize the Children's Pastor to make a request for a Marion County Request for Limited Criminal History; (6) agree to inform the Children's Pastor if any information in this application is no longer complete or correct.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Once you are finished with this application, please submit it to the church office or pastor. All applications will be kept confidential.