



Children/Youth Volunteer Application

Please note: This application is required for all applicants in any position involved in the supervision and/or custody of minors. This application is used to provide a secure environment for those children and youth who participate in Bethel Ministries, Inc. programs and use of facilities. (All information is kept confidential.)

Name: _____

Address: _____

Daytime Phone: _____ Work Phone: _____ Cell Phone: _____

Date of Birth (mm/dd/yyyy): _____ Email: _____

Spouse's Name: _____

Age Preference: 0-3 years 3-5 years 6-11 years
 11-14 years 15-18 years

Marital Status: Single Married
 Divorced Widowed

Ministry Availability: Weekly Three times per month
 Twice per month Once per month
 Other _____

Have you ever:
• been convicted of a criminal offense (excluding traffic tickets)? Yes No
• been convicted of child abuse, neglect or molestation? Yes No
• been hospitalized for drug or alcohol abuse? Yes No

If yes, please explain:

Do you:
• have a drug dependency of any type? Yes No
• have any physical disabilities or conditions that prevent you from performing certain types of activities? Yes No

If so, please explain:

Do you voluntarily consent to a background check? Yes No
(If no, we cannot accept you as a children/youth volunteer.)

Are you aware of:
Anything in your personal character that would exempt you from working with children or youth? Yes No
Any emotional, mental or physical handicaps that would hinder your participation or effectiveness? Yes No
If the answer to any of these questions is "yes," please explain in detail:

Church Activity

Have you accepted Jesus Christ as your personal Savior?

Yes No

If yes, when? _____

Have you been filled with the Holy Spirit with the evidence of speaking in tongues?

Yes No

If yes, when and where? *(This is not a requirement for service)*

Describe your devotional life.

What church or churches have you attended in the past five years?

Church Name

Pastor's Name

Years attended

List any previous church work involving children and/or youth.

Church name

Type of work

Responsibilities

List any experiences, gifts, callings, training, education, or other factors that have helped prepare you for ministry to children and/or youth.

Personal References – At least two, one of which must be a church reference (not former employees or relatives).

Name/Relationship

Address

Phone

Children's/Youth Work Verification and Release

I recognize that Bethel Assembly is relying on the accuracy of the information I provide on the Children/Youth Volunteer Application form. Accordingly, I attest and affirm that the information provided is accurate.

I authorize this organization to contact any person or entity listed on the Children/Youth Volunteer Application form, and I further authorize any such person or entity to provide this organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release this organization (Bethel Ministries, Inc.) and any such person or entity listed on the Children/Youth Volunteer Application form from liability involving the communication of information relating to my background or qualifications.

Should my application be accepted, I agree to refrain from any unscriptural conduct in the performance of my services on behalf of Bethel Assembly.

I agree to abide by the policy and procedures of this organization (Bethel Assembly) and to protect the health and safety of the children or youth assigned to my care or supervision at all times.

Print Name: _____

Signature: _____ Date: _____

(Please read this document carefully before signing.)