

# Volunteer Application for Salem Baptist Church Preschool/Children/Youth Ministries

This survey is to be completed by all those desiring a ministry position involving the supervision or custody of minors. It is being used to help the church provide a safe and secure environment for those children/youth who participate in our programs and use our facilities.

**All information is held strictly confidential by the Child Protection Team.**

Name \_\_\_\_\_ Date: \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_  
Street City State Zip

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Home email \_\_\_\_\_ Work email \_\_\_\_\_

Emergency contact \_\_\_\_\_

Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_

Which area of Children's Ministry are you interested in? Circle all that apply.

- Nursery      Sunday school teacher      AWANA program      Preschool/Children Choir  
Children's Church      Children's Summer Ministry      Youth      Vacation Bible School      Chaperone

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1. Are you a member of Salem Baptist Church of Dobson? \_\_\_\_\_ yes \_\_\_\_\_ no How long? \_\_\_\_\_

2. How long have you resided in North Carolina? \_\_\_\_\_

3. Do you have any medical training or are you CPR certified? \_\_\_\_\_ If yes, please explain:

\_\_\_\_\_

4. Have you read and you do understand and agree to abide by the Child Safety and Protection Policy and to observe all church policies regarding work with children or youth? \_\_\_\_\_ yes \_\_\_\_\_ no

5. Do you consent to a criminal background check? \_\_\_\_\_ yes \_\_\_\_\_ no

6. Personal References: (Must be over 18 years and not family members.)

**Name:** \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Address: \_\_\_\_\_  
Street City State Zip

**Name:** \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Address: \_\_\_\_\_  
Street City State Zip

**Name:** \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Address: \_\_\_\_\_  
Street City State Zip

The information contained in this application is correct to the best of my knowledge. I authorize Salem Baptist Church of Dobson, NC to obtain information from references and churches listed in this application, including opinions that they may have regarding my character and fitness for children's work.

Should my application be accepted, I agree to be bound by the By Laws and Policies of Salem Baptist Church in Dobson and to refrain from unscriptural conduct in the performance of my service on behalf of the church.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**BACKGROUND INVESTIGATION CONSENT**  
**Salem Baptist Church Dobson, NC**

I, \_\_\_\_\_ hereby authorize the Child Protection Team of Salem Baptist Church to make an independent investigation of my background, references, character, past employment, education, criminal or police records including those by both public and private organizations and all public records for the purpose of confirming the information contained on my application or volunteer form(s), and/or obtaining other information which may be material to my qualifications for employment or as a volunteer now and, if applicable, during the tenure of my employment or as a volunteer with Salem Baptist Church.

I release Salem Baptist Church and any person or entity which provides information pursuant to this authorization, from any and all liabilities, claim or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

Full Name (printed)\_\_\_\_\_

Maiden/Other Names\_\_\_\_\_

Date of Birth\_\_\_\_\_

Driver's License No.\_\_\_\_\_ State Issued\_\_\_\_\_

Present Address\_\_\_\_\_

City/State/Zip\_\_\_\_\_

Length of time at address\_\_\_\_\_ Phone No.\_\_\_\_\_

Prior addresses and dates (for past 7 years)

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

Signature\_\_\_\_\_ Date\_\_\_\_\_