

**Confidential**

**Volunteer Application Form**

**PLEASE PRINT LEGIBLY**

**First Baptist Norfolk**

DATE \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle (Maiden Name)

Do you have a personal relationship with Jesus Christ? \_\_\_\_\_ Briefly describe how you came to know Him \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a member of First Baptist Norfolk? \_\_\_\_\_ If yes, how long have you attended First Baptist Norfolk? \_\_\_\_\_

Please check the services or groups you regularly attend:

Sunday Life Group \_\_\_\_\_ Sunday Worship Gathering \_\_\_\_\_

List any gifts, training, education and other factors that have prepared you to work with minors:

First Aid \_\_\_\_\_ Assisting person with handicaps \_\_\_\_\_ CPR \_\_\_\_\_ Other \_\_\_\_\_

I am interested in working with (check appropriate boxes) \_\_\_\_\_Preschool \_\_\_\_\_Children \_\_\_\_\_Students  
\_\_\_\_\_Special Needs Ministry \_\_\_\_\_Preschool/Children’s Choirs \_\_\_\_\_Missions  
\_\_\_\_\_Summer Programs \_\_\_\_\_Camps \_\_\_\_\_Vacation Bible School

Please list any other First Baptist Norfolk ministries you are involved in:

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

Why do you desire to work with children? \_\_\_\_\_  
\_\_\_\_\_

As a volunteer you are agreeing to be committed to fulfilling the responsibilities given to you which includes:

- Maintain your personal relationship with God
- Participate in training/planning meetings
- Support the total ministry of the church

**Applicant’s Statement**

The information contained in this application is correct to the best of my knowledge. I authorize any references, churches, or other organizations listed in this application to give you any information they may have regarding my character and fitness for working with minors or the mentally challenged and I release all such references from liability for any damage that may result from furnishing such evaluations to you.

Should my application be accepted, I agree to follow the Policies of First Baptist Norfolk and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I understand the personal information will be held confidential by the professional church staff.

I further state that I have carefully read the forgoing release and know the contents thereof and I sign this release as my own free act.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_