Confidential Volunteer Application

Children's Ministry

First Assembly of God 1137 Arbutus Ave. Chico, CA 95926 530-345-1137

Please attach a
recent photo of
yourself here©

This application is to be completed by all volunteers for any position involving the supervision or custody of minors in church facilities or on church sponsored activities. It is being used to help the church provide safe and secure environment for those children/youth who participate in our programs here at First Assembly of God and or use our facilities.

•	Date:		
	<u>Pers</u>	<u>onal</u>	
Name:			26.111.)
(Last)	(First)	((Middle)
Address:			
(City)		(State)	(Zip)
How long at this address?			
If less than five years, give previous	ıs address		
Social Security number:			
Marital Status: Married Sin	gle Engaged	Divorced	Widowed
Spouse's Name:			
Phone numbers: Home:		Cell:	
Email:			
Children's names and ages:			
Do you have a current driver's lice	ense? D	DL state:	
Drivers License Number:			

In case of emergency please not	ify	Phone	÷			
Have you ever been involved, co abuse, sexual abuse, neglect, mo		•				
(Please note that when answering "yes", or leaving the question unanswered will not automatically disqualify you.)						
If yes, explain:						
Have you ever been convicted o	r pleaded guilty to a cri	me? Yes No				
If yes, explain:						
Drink alcoholic beverages?	Do you use	e nonprescription dru	ıgs?			
Do you regularly attend First As	ssembly of God church	services? Yes 1	No			
If yes, since when?						
Name of church of which you ar	re a member:					
List all ministries you are involved	ved or interested in beco	oming involved with	at Chico 1 st Assembly:			
List all previous churches you h	ave faithfully attended	during the last five y	ears.			
·	•					
Church name:						
Address:						
Type of work preformed						
Church name:						
A ddunger	C:4	C4	7:			

Type of work preformed			
Church name:			
	City		
Type of work preformed			
	us ministry experience or pe equisites to volunteer particip		
List all previous non-church	n work involving minors:		
Organization	Address		hone #
	licaps or conditions preventi blain:		
	<u>Spirit</u>	<u>ıal</u>	
Have you committed to trus	at and follow Jesus as your p	ersonal Lord and Sav	vior?
When did you receive Chris	et?		
Please describe your person	al spiritual journey to date:		
			_

Please describe your daily walk with God (ie. Prayer life and devotional life)			
Have you been filled with the Holy Spirit according to Acts 2:4?			
List any gifts, callings, training, education, or other factors that have prepared you for Children/Youth work.			
Are you familiar with the 16 Fundamental Truths of the Assemblies of God?(online at www.ag.org)			
Do you disagree with any of the 16 Fundamental Truths? If so, which and why?			
Have you ever led a minor to Christ?			
Have you ever helped a minor receive the Holy Spirit baptism?			
What type of children/youth work do you prefer?			

Personal References:
Please list those you have known at least 3 years
(No relatives or former employers)

1. Name:	
Length of time known:	
Nature of association:	
Address:	
Home #:	Work #
2. Name:	
Length of time known:	
Nature of association:	
Home #:	Work #
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references or churches listed in this character and fitness for children/ye damage that may result from furnis agree to be bound by the Constituti refrain from any unscriptural condu I further state that I have carefully in	pplication is correct to the best of my knowledge. I authorize any application to give you any information they may have regarding my buth work, and I release all such references from liability for any ning such evaluations to you. Should my application be accepted, I on, Bylaws and policies of First Assembly of God Church, and to ct in the performance of my service on behalf of the church. ead the request and application. I understand thereof and I sign this free act. This is a legally binding agreement, which I have read and
Applicant's signature:	Date: