

Crossroads Christian Church

Middle School Ministries Volunteer Application

Thanks for showing an interest in joining the Middle School Ministry! At the request of our insurance company and to properly cover the liability of our church, all youth workers must **completely** fill out the following application. The purpose of this form is to guarantee the protection and welfare of the young people of our church. All information stated or obtained shall remain confidential.

PERSONAL INFO

Name _____ Male Female

Present Address _____

City, State Zip _____

Home phone _____ Work phone _____

Marital Status: Single Married Separated Divorced

Spouse's name: _____ Children's name(s): _____

Today's Date _____

CROSSROADS

Do you attend weekend services at Crossroads regularly? Yes No How long? _____

Are you a member of Crossroads? _____ Yes No How long? _____

Have you served in a ministry at Crossroads? _____ Yes No

Which Ministries? _____ How long? _____

_____ How long? _____

BACKGROUND

Have you been convicted of/or pleaded guilty to a crime? Yes No

If yes, please explain. _____

Are there any facts or circumstances involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of children or youth? For example: chemical/ substance abuse, mental/physical health issues, contraction of a communicable disease (HIV, AIDS, Hepatitis, etc.), or an experience with abuse or molestation. Yes No

All Applicants are required to have a Criminal Record Check before being allowed to serve in any ministry of Crossroads Christian Church. Please see the section marked "Applicant's Statement".

CHRISTIAN FAITH

Describe your life before you met Christ and now that you know him?

Who are two people who have influenced you most in your desire to serve Christ?

Name _____ Relationship _____

Name _____ Relationship _____

Why do you desire to serve in as a volunteer in Crossroads Student Ministries?

Explain on a separate sheet of paper what you believe the Bible teaches on the following:

- | | | | |
|-----------|----------------|-----------|--------|
| Salvation | God The Father | Communion | Purity |
| Baptism | Jesus Christ | Giving | |

EXPERIENCE

What area of interest would you like to serve in Crossroads Jr High Ministries?

- Insight D-Group New Community Office Help Other

Please list any experience you have had in this area of interest.

Please describe any volunteer work you have done in the last five years.

TEMPERAMENT

Please place your personal observations about yourself and your preferences on the following:

- Introverted3.....2.....1.....0.....1.....2.....3 Extroverted
 Routine3.....2.....1.....0.....1.....2.....3 Variety
 Feeler3.....2.....1.....0.....1.....2.....3 Thinker
 Behind the scenes.....3.....2.....1.....0.....1.....2.....3 In front of people
 Working with individuals.....3.....2.....1.....0.....1.....2.....3 Leading a group toward a goal
 People-oriented3.....2.....1.....0.....1.....2.....3 Task-oriented

REFERENCES

Please give two character references (no relatives please).

Name _____ Phone () _____

Address _____ State _____ Zip _____

Name _____ Phone () _____

Address _____ State _____ Zip _____

APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for working with children. In consideration of the receipt and evaluation of this application by Crossroads Christian Church, I hereby release any individual, church, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the by-laws and policies of Crossroads Christian Church, and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I further state that **I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** This is a legally binding agreement which I have read and understand.

IMPORTANT: THIS MUST BE COMPLETED BY EVERY APPLICANT OR VOLUNTEER, REGARDLESS OF CRIMINAL RECORD.

I hereby request and authorize the release of any information which pertains to any record of convictions contained in law enforcement files or in any criminal file maintained on me whether local, state, or national. I hereby release local, state and national law enforcement agencies from any and all liability resulting from such disclosure.

Signature

Print Name

Print maiden name if applicable

Date of birth

Driver's license number and state

Social Security Number

OFFICE USE

- | | |
|---|---|
| <input type="checkbox"/> Reference check letter sent Date _____ | <input type="checkbox"/> Staff response _____ |
| <input type="checkbox"/> Background check processed Date _____ | <input type="checkbox"/> Short interview Date _____ |
| <input type="checkbox"/> Long interview Date _____ | <input type="checkbox"/> Added to database _____ |

*Please return this application to the Middle School Ministry Office:
Crossroads Christian Church, PO Box 5386, Evansville, IN 47716, (812) 858-8668.*