

Applicant Name: _____ Date: _____

Volunteer

This application form given to applicant by _____

**Neighborhood Church /
Stafford Academy**
CONFIDENTIAL

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors. This form is used to help the churches/organization provide a safe and secure environment for those children who participate in our programs and use our facilities. The information contained in this application will be treated with the utmost of confidentiality and respect.

The questions contained herein are not designed to offend or to pass judgment, but rather create an environment where a person's past will not hinder the ministry in carrying out their mission in a safe, fun, and productive way. If you are a person who must answer affirmatively to any of the questions on the following pages, we may contact you for a personal interview. Please be assured that answering affirmatively does not necessarily preclude you from serving with minors.

Screening Form

Full Legal Name

First _____ Middle _____ Last _____

Gender M F

Street Address _____

City _____ State _____ Zip Code _____

County _____ E-mail _____

Home Phone _____ Cell Phone _____

Date of Birth ____ / ____ / ____ Social Security Number (required) _____

Are You: (circle one) Single Married Separated Divorced Widowed

If married, how many years? _____ Spouse's Name _____

Do you have children? No Yes If yes, how many? _____

21065 SW Stafford Road, Tualatin, OR 97062 (503) 638-8765 (503) 638-6316 Fax

Personal References

List two people that you know, who meet the following criteria:

- 1) Is over 18 years old
- 2) Is not a relative or a current employee
- 3) Has seen you around minors
- 4) Has known you for more than 1 year
- 5) Has a definite knowledge of your character

#1 Reference

Full Name _____ Relationship _____

Home Phone _____ Cell Phone _____

Email _____

Notes (Office Use Only):

#2 Reference

Full Name _____ Relationship _____

Home Phone _____ Cell Phone _____

Email _____

Notes (Office Use Only):

Institutional Reference if applicable. (ie. school, daycare, church, etc.)

Name _____ Phone number _____

Release

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches/organizations listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for work with minors.

I authorize the release of the information contained in this application, on a confidential, need to know basis, to any ministry at the Neighborhood Church/Stafford Academy in which I seek a position (volunteer or compensated). In consideration of the receipt and evaluation of this application by the Neighborhood Church/Stafford Academy,

I hereby release a church, youth organization, charity, employer, 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. To uphold the confidentiality of the references, 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 Bylaws and policies of the Neighborhood Church/Stafford Academy and to refrain from unscriptural conduct in the performance of my services on behalf of this organization. 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.

I agree (circle)

Applicant's Signature _____ Date _____

Is there any other information you would want us to know?

Official Use Only	
Applicant's Name	_____
Date Processed	_____
References calls made by	_____
Background check completed by	_____
_____ Approved	_____ Not Approved
_____ Limited Approval	
Reason	_____
