



## Ministry Application - Adult Volunteer

This application is to be completed by all adult volunteers applying for any position involving the supervision or custody of minors. This application is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Does your spouse attend CVCC church? Yes No

**\*\*Identity must be confirmed with a state driver's license or other photo identification**

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Who lives in your house? (Please list names and relationship to you): \_\_\_\_\_

How long have you been attending Chino Valley Community Church? \_\_\_\_\_

I am a member      I am a regular attendee

I am a part of an Adult Sunday School class or Small Group. Which one? \_\_\_\_\_

What excites you most about serving in Children's Ministries?

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Please list any experience or training you have working with children? Explain...

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Please write your personal testimony (if additional space is needed, add an extra page).

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**Please turn over and complete**

A "Yes" answer to the following questions does not automatically exclude you as a volunteer, but they are mandatory to answer. Please add an explanation or write, "to discuss in private" should you wish to not write your answers down.

Have you ever been accused or convicted of any crime involving a minor? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any physical handicaps or conditions we need to be aware of to help place you in the most suitable role?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been treated for any form of mental illness Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

### **References**

Please list 2 persons, ***not related to you***, whom you have known for a minimum of one year.

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

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### **Signature**

I have filled out this application completely, and all of the answers are true to the best of my knowledge.

I have read and agree with the Chino Valley Community Church Statement of Faith (can be found on the CVCC website).

I understand that working with children is a privilege and that filling out this application does not guarantee I will become a volunteer.

Should I be selected as a volunteer in Children's Ministry I will uphold all policies and procedures put into place and will always work my best to reflect CVCC's Children's Ministry in a positive way.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please type agree on the above line with your name.