



West Valley Missionary Church

Volunteer Application

West Valley Missionary Church has a child safety policy founded on respect and love for the children of our church and community. This safety policy gives children, parents and ministry staff a sense of confidence and peace. We ask your cooperation in completing and then returning the application.

Name _____ SS # _____

Address _____ Email _____

Home Phone _____ Work Phone _____ Cell Phone _____

Birthdate (mm/dd/yr) _____ If under 18, age _____ completed grade in school _____

Are you currently a member or regular attender of WVMC? () Yes () No

If "yes," how long have you been attending? _____

Have you ever worked with a ministry involving children? () Yes () No If "yes," at what church?
Please include city and state.

If "yes," circle all that apply:

Sunday School • Mid-week program • VBS • Camp • Children's Church • Nursery • Children's Choir

Other (please specify) _____

In what ministries/activities of WVMC are you presently involved?

Have you ever been charged with or convicted of a criminal act (including but not limited to child abuse, sexual molestation of a minor, drugs, DUI, etc.)? () Yes () No

If yes, please explain. _____

Have you ever been dismissed from a job working with or near children? () Yes () No

If yes, please explain. _____

Because of the world we live in and our responsibility to protect the children attending West Valley Missionary Church to the best of our ability, all ministry staff must undergo a background check. Do you have any objections? () Yes () No

Please briefly tell about your relationship with Jesus Christ.

List any gifts, calling, training, education, etc. that have prepared you for ministry to children.

Ministry for which you are volunteering. Circle any that apply:

Sunday School • Mid-week program • VBS • Camp • Children's Church • Nursery • Children's Choir

Other (please specify)

What do you enjoy most about working with children? Do you have any apprehensions about the ministry you are contemplating?

Please give two personal references (not a former employer or relative):

Name _____ Name _____

Home Phone _____ Home Phone _____

Years Known _____ Years Known _____

Relationship _____ Relationship _____

APPLICANT'S STATEMENT AND SIGNATURE

The above information is true and correct to the best of my knowledge. I authorize the persons named above to give you information they may have regarding my character and ability to work with children. I also hereby certify that I have read and understand the attached child safety policy.

Signature _____ Date _____

Parent's Signature (required if under 18) _____ Date _____