**INCLUSIVE MINISTRY VOLUNTEER APPLICATION/PERSONAL INFORMATION**

Name

Last First Middle

Home Phone Work Phone

Mobile Phone Email

Best time to contact you I want to serve with:

Children with disabilities\_\_\_\_ Adults with disabilities\_\_\_\_

Available to serve (Circle all that apply):

Saturday Sunday Weekdays Weeknights

Present church member:

* Yes
* No
* Actively attended since \_\_\_\_\_\_\_\_\_
* In membership process

Church positions held in the past

What skills, spiritual gifts or talents do you have which might be useful in this position?

What training or experiences do you have which might be useful in this position?

If the opportunity arose for you to lead an individual to Christ, what would you do?

Have you been convicted of a criminal offense?

* Yes (If yes, please explain below)
* No

Have you been convicted of abuse or sexual abuse or been involved in any activities related to molesting or abuse??

* Yes (If yes, please explain below)
* No

Do you have any moving violations on your driving record?

* Yes (If yes, please list and explain below)
* No

References: (Please provide name, email and phone of **two** references, including a former volunteer superintendent or church if possible. NOTE - These references should not be personal or family references.)

I certify that all information provided in this application is complete to the best of my knowledge. I understand that any false information or omission may disqualify me from further consideration, or that discovery of such information at a later date may result in my removal.

Signature Date

I, the undersigned consumer, do hereby authorize Christ Church by and through its independent contractor, to procure a background check (also known as a “consumer report and/or investigative consumer report”) on me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

**PERMISSION TO CONDUCT BACKGROUND CHECK**

I understand that this authorization and release shall be valid during my volunteer service at Christ Church for the purpose of investigating any incidents of misconduct or criminal activity for which I am alleged to have been involved during my volunteer service.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report of which I am the subject upon my written request to Christ Church, if such is made within a reasonable time after the date hereof.

Signature Date

**IDENTIFYING INFORMATION FOR CONSUMER REPORTING AGENCY**

*(Please Print)*

Name

Last First Middle

Other Names Used (alias, maiden, nickname)

Years Used

Current Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Former Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Social Security Number Daytime Phone

Driver’s License Number State of Issuance

\*Date of Birth \*Gender

*\* This information will enable the investigating contractor to properly identify you during the course of the background search.*

**STATEMENT OF CONFIDENTIALITY AND ACKNOWLEDGEMENT AGREEMENT**

**Sign and Return to:**

**Christ Church**

**7600 Ox Road**

**Fairfax Station VA 22039**

Please complete, detach, and return this portion of the policy to indicate that you have read, understand, and accept the *Guidelines and Policies for the Caring and Teaching of the Children and Youth of Christ Church*

Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (street)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(city) (state) (zip code)

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­

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Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have read and understand the policy, and I agree to abide by it.

I agree to respect the privacy of the people Christ Church serves, and I agree to hold in confidence any information I obtain in the course of service, whether I obtain that information through written records or daily interaction with an individual. I agree not to disclose an individual’s confidences to anyone, except in the following circumstances:

(1) As mandated by law.

(2) To prevent a clear and immediate danger to individuals.

(3) Where I am compelled to do so by a court or pursuant to the rules of a court.

I agree to abide by the church’s policies to store or dispose of records in ways that maintain confidentiality.

I agree to uphold confidentiality toward the people the church serves, colleagues, applicants, and any sensitive situations arising within the church.

I also agree that when my term of volunteer service ends, to maintain volunteer and co-worker confidentiality, to continue holding in confidence any information about sensitive situations within the church.

Volunteer signature Date