



CROSSROADS COMMUNITY CHURCH
Confidential
Child Safety Program Volunteer Application

This application will be asking some very personal and private questions. It is our intention to find out more about the people that we are entrusting with minors. These questions are not intended to offend or to pass judgment, but rather to create an environment where a person's past or present will not hinder a ministry in carrying out their mission in a safe, fun and productive way. The information contained in this application will be treated with utmost confidentiality and respect. Our Elders have mandated strict criteria for the treatment and storage of Confidential Documents. The completed forms will be stored in a locked file cabinet.

The application is to be completed by all applicants for any position involving supervision of minors in conjunction with CRCC new member assimilation.

CURRENT INFORMATION

Name: _____ DOB: _____ Date: _____

Social Security Number: (For Background Check purposes only): _____

Address: _____ City: _____ St: _____ Zip Code: _____

Home phone: _____ Work phone: _____

E-mail address: _____

Driver's License# (for youth work only): _____

Circle all that apply single married parent male female

If applicable, list children with ages: _____

Are you a member of CrossRoads Community Church? _____ How long? _____

If you are not a member, how long have you been attending? _____

Have you attended a Membership Orientation Class? _____

Do you attend a Community Group? _____

If yes, who is your leader? _____

List current and past CRCC ministries in which you have been involved.

What role does God (Jesus Christ) play in your life? _____

Why are you interested in serving with children or youth and where are you in the CRCC induction process?

BACKGROUND AND TRAINING

Date of CPR or First Aid Training Certification? (If applicable) _____
What other training or certification do you possess that may enhance the safety and well-being of the children at CrossRoads Community Church?

For Fusion volunteers: Are you active on social media? _____ If so, what are your screen names for each media?

REFERENCES

PERSONAL REFERENCES

Please list two people who meet the following criteria:

- 1) Is over 18 years old
- 2) Has seen you around minors
- 3) Is not related to you
- 4) Has a definite knowledge of your character

1. Name: _____

Mailing address: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

Length of time known: _____ Relationship: _____

2. Name: _____

Mailing address: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

Length of time known: _____ Relationship: _____

CHURCH REFERENCES

Please list other churches you have attended over the past five years and the ministries in which you were involved (If applicable).

1. Church Name: _____ Contact Person: _____

Phone/ e -mail #'s: _____

Ministries involved in: _____

2. Church Name: _____ Contact Person: _____

Phone/ e -mail #'s: _____

Ministries involved in: _____

Are there any circumstances regarding your departure from the church(es) that we should be aware of? _____

OTHER

Please list previous volunteer or paid work in a church or non-church organization involving children or youth within the past 10 years.

1. Organization Name: _____ Contact person _____

Phone/e-mail #'s: _____ Type of work: _____

2. Organization Name: _____ Contact person: _____

Phone/e-mail #'s: _____ Type of work: _____

BACKGROUND AND PERSONAL SITUATIONS

If you prefer, you may write over these questions with the statement, "I would prefer to privately discuss these questions with a member of the Child Safety Team."

1	Y	N	Are there any health issues that would preclude service?
2	Y	N	Have you ever been convicted of a felony?
3	Y	N	Have you ever been convicted of any crime involving a minor?
4	Y	N	Have you ever been investigated, disciplined, or dismissed from employment or a volunteer position, following an allegation of sexual misconduct, sexual harassment, violence or other immoral or inappropriate behavior or conduct involving adults or children?
5	Y	N	Is there any circumstance or pattern in your life, which would make it inappropriate for you to serve with minors or would compromise the integrity of CrossRoads Community Church?

Answering yes to some of these questions may not preclude you from serving with minors. However, if answering these questions has led you to conclude that it would be inappropriate for you to serve around children at this time, we would like to encourage you to not cut yourself off from the church or other Christians. Also, there are other areas in the church that need help, that do not require direct supervision of minors, and your help would be most welcome! We want to remind you that whatever may be in your life now, or in your

past, Jesus Christ offers forgiveness and healing-forgiveness is immediate, but healing is usually a process. "Now to him who is able to do immeasurably more than all we ask or imagine, according to his power that is at work within us, to him be glory in the church and in Christ Jesus throughout all generations, for ever and ever!" (Ephesians 3:20-21).

NOTICE – BACKGROUND INVESTIGATION

In connection with your willingness to serve at CrossRoads Community Church ("CRCC"), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for volunteering in our Children's ministry purposes. These reports may contain information about your character, general reputation, personal characteristics, and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends, or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting CRCC and Protect My Ministry 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618; Phone: 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com. The scope of this notice and below authorization is not limited to the present and as long as you agree to serve, will allow CRCC to conduct future screenings for retention, or promotion, as permitted by law and unless revoked by you in writing.

By signing below I hereby authorize the obtaining of background report and/or investigative consumer reports by CRCC at any time after receipt of this authorization and throughout the course of my volunteer service, if applicable.

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references listed in this application (personal references, organizations, and churches) to give you any information (including opinions) that they may have regarding my character and fitness for children or youth work. I authorize the release of the information contained in this application, on a confidential, need to know basis, to any Ministry Leader in which I seek a position. I release all such references from any liability for furnishing such evaluations to you provided they do so in good faith and without malice.

I understand and agree that it is critical to the mission and ministry of CrossRoads Community Church that all employees and volunteers conform to the highest standards of safety, interpersonal conduct, and sexual morality. Should my application be accepted, I affirm that I will strictly comply with CrossRoads Community Church Child Safety Program and the policies and procedures set forth by the ministry in which I volunteer.

I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN FREE ACT.

Applicant's Signature: _____ Date: _____

Parent/Guardian Applicant's Signature: _____ Date: _____

(If Applicant is a youth volunteer)

I hereby give consent for the processing of my fingerprints in order to access my criminal background information.

Applicant's Signature: _____ Date: _____

VOLUNTEER PREFERENCES

Are you interested in teaching? (3 months out of the year on a rotating basis) **YES** **NO**

Ways to volunteer:

CLASS	MONTHLY (12 Times a year)	BI-MONTHLY (6 Times a year)	QUARTERLY (4 Times a year)	5TH SUNDAYS	Special Occasions (example: Special Performances, Holidays)
Nursery					
2 & 3's					
4 & 5's					
KidTricity					
Child Check In					

For more information contact:

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