

# Antioch Kids: Volunteer Application

**THANK YOU** for choosing to serve in the kids department as a member of our life-changing team! We consider it a privilege to minister to kids here at Antioch Community Church. Please fill this out and return it to the Kids Director.

***Please complete and return the attached application.***

The information contained in this application will be kept confidential and will only be disclosed to those who have a genuine need to know in order to carry out their responsibility for/in Antioch Community Church, or as required by law. The purpose of obtaining this information is to protect both our workers and children.

Name \_\_\_\_\_ Age \_\_\_\_\_ Phone # \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Carrier \_\_\_\_\_  
(Optional Text reminders for Planning Center)

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Place of Employment \_\_\_\_\_

Do you attend Lifegroup? \_\_\_\_\_ Lifegroup leader's name(s) \_\_\_\_\_

How long have you attended ACC:FC? \_\_\_\_\_

Why do you feel that you want to serve in the children's department?

Though it is not required, what prior experience do you have working with kids?

What do you feel is one of your natural and/or spiritual giftings?

What role would you prefer to have? We try to accommodate as much as possible. Check all that apply.

- Nursery (Age 0-3)
- Pre/K Small Group Leader (3-5)
- Elementary Small Group Leader (6+)
- Sunday Morning Director for Age 3-12 (works with 2 small group leaders)
- Kids Lifegroup Leader (biweekly Tuesday or Thursday)

What is your favorite way to be encouraged?

*Legal Questionnaire:*

For the protection of the children, we must ask the following questions. Answering “yes” will not automatically disqualify you for this ministry, but we ask that you please attach a written explanation for all “yes” answers.

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|--|-----|----|
| 1. Have you been convicted of an offense other than a minor traffic violation(s)?  | Yes | No |
| 2. Have you ever been convicted of a sexual offense, offense relating to children, abuse, or crime of violence (that is not covered in question 1)?              | Yes | No |
| 3. Have you ever been sexually abused, or been the victim of abuse in any form? If so, describe any counseling you have received for that.                       | Yes | No |
| 4. Have you ever been the subject of any disciplinary action, transfer or dismissal, as a result of an accident or mishap involving children?                    | Yes | No |
| 5. Have you ever been accused, charged or alleged to have committed any act of neglecting, abusing or molesting any child?                                       | Yes | No |
| 6. Have you ever been subject to any disciplinary action (including discharge) or investigation by a church, religious or other organization, or by an employer? | Yes | No |
| 7. Do you have any drug, alcohol or substance abuse problems; or has anyone ever suggested that you may have a problem?  | Yes | No |
| 8. Have you been concerned that you may have an addiction to pornography; or has anyone ever suggested that you may have a problem?                              | Yes | No |
| 9. Are you practicing a sexual lifestyle that would not be considered scriptural?  | Yes | No |
| 10. Are you currently taking medication for any emotional disorders?   | Yes | No |
| 11. In the past 6 months, have you been hospitalized due to a mental or emotional disorder?  | Yes | No |
| 12. Is there anything else going on in your life that you need some pastoral help working through; or you believe that we should know?                           | Yes | No |

I understand that to verify my suitability as a volunteer worker for the children’s department, ACC will request a criminal records search. I understand that the personal information will be held confidential by the children’s directors and church leadership. As a volunteer worker in the children’s department of ACC, I agree to observe and abide by the policies and safeguards measures of ACC.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### CRIMINAL RECORDS CHECK AUTHORIZATION

I hereby authorize Antioch Community Church to obtain any information which pertains to any record of convictions maintained on me whether local, state or national.

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Location of Birth (city and state)

\_\_\_\_\_  
Social Security Number\*

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

\_\_\_\_\_  
Prior Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Full Legal Printed Name

**\*Note – Your SSN will remain a matter of private information and will not be disclosed for purposes other than processing a criminal records check.**

**Volunteer’s Statement:**

The responses I have provided in completing this application form are complete, truthful and accurate. I hereby authorize ACC to make inquiries concerning my background and authorize all persons associated with me, including churches, employers, law enforcement agencies, licensing and social services agencies, to release any information contained in their files or records concerning me to ACC and its representatives.

- I declare that I have not engaged in sexual abuse, or a pattern of physical, emotional, or spiritual abuse, or neglect of a child. If I have been the subject of an allegation of a complaint, disciplinary action or dismissal due to such acts, regardless of the outcome of the allegation, I have notified the Kids Department at Antioch Community Church.
- I understand my responsibility to verbally report abuse and other inappropriate conduct toward a child to my Department Head or the Child Safety Officer to implement Child Safety Procedures.
- I understand ACC takes allegations of child abuse seriously and that abuse in any form will not be tolerated. I understand that Antioch Community Church will cooperate with civil authorities in the investigation of any report of abuse.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant’s Name (printed) \_\_\_\_\_

Received by Department Head \_\_\_\_\_ Date \_\_\_\_\_