

**Children's & Youth Ministry  
Volunteer Staff Application  
Simpsonwood UMC**

**Section 1. General Information**

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ Zip \_\_\_\_\_  
Profession/Occupation \_\_\_\_\_  
Education \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Drivers License #: \_\_\_\_\_  
How long have you attend this church? \_\_\_\_\_  
Special interests, hobbies, and skills: \_\_\_\_\_  
How many hours per week are you available to volunteer? \_\_\_\_\_  
\_\_\_\_\_ Days \_\_\_\_\_ Evenings \_\_\_\_\_ Weekends

**Section 2. Personal History**

*(Note: Where necessary, please supply additional information on separate sheets of paper.)*

Please list the names and addresses of other churches you have attended regularly during the past five years, noting all previous work involving children and youth and the name of a supervisor for each ministry.

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Why would you like to volunteer as a worker with children and/or youth?

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What qualities do you have that would help you work with children and/or youth?

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How were you parented as a child? \_\_\_\_\_

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How do you discipline your own children? \_\_\_\_\_  
\_\_\_\_\_

### Section 3. Background History

Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)?  No  Yes  
If yes, please explain fully:

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

Have you ever been exposed to an incident of child abuse or neglect?  No  Yes

If yes, how did you feel about the incident? \_\_\_\_\_

Would you be available for periodic volunteer training sessions?  No  Yes

Are there any moving violations on your driving record?  No  Yes  
If yes, please explain \_\_\_\_\_

To the best of your knowledge, is there anything from your past that would disqualify you from working with children and youth?  No  Yes  
If yes, please explain: \_\_\_\_\_

### Section 4. References

Please list two personal references (people who are not related to you by blood or marriage) and provide a complete address and phone information for each. References are confidential.

1. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_  
Evening phone: \_\_\_\_\_  
Relationship to reference: \_\_\_\_\_

2. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_  
Evening phone: \_\_\_\_\_  
Relationship to reference: \_\_\_\_\_

**Section 5. Faith Statement**

On a separate piece of paper, please provide a brief testimony of your Christian faith journey. (Including date of membership, date of baptism, affirmation of trinity)

**Section 6: Applicant's Statement**

The information I have given in this application is correct and complete to the best of my knowledge. I agree that false information or significant omissions may disqualify me from further consideration for service and may be considered justification for dismissal if discovered at a later date. I also authorize Simpsonwood UMC to contact references and to conduct background checks that could include review of personal records such as driving, police, etc.

Should my application be accepted, I agree to be bound by the constitution and policies of Simpsonwood UMC.

\_\_\_\_\_ Date: \_\_\_\_\_  
Applicants's Signature

\_\_\_\_\_ Date: \_\_\_\_\_  
Staff Signature