

VOLUNTEER APPLICATION FORM

The information obtained on this form is for internal use by this local church only.

Name:		Date of Birth:			
Last	First	Middle			
Address:					
City, state, ZIP:		Business			
Home telephone:	Cell	Business			
E-Mail:					
Volunteer position ap	oplied for (please circle al	I that apply) Youth/children/nursery/driver			
Occupation:					
Current employer an	d business address:				
Time at this employn	nent:yearsn	nonths			
List (name and addre	ess) other churches you h	nave attended regularly the past five years:			
How long have you b	peen a member or regular	r attendee at PVMC?			
References: Please	list three personal referen	nces (people who are not related to you by blood or n	narriage) and	
		tion for each. References are confidential.	.aago	,	
1. Name:	·	Address:			
Best contact numb	er:	Relationship to reference:			
2. Name:		Address:			
Best contact numb	er:	Relationship to reference:			
3. Name:		Address:			
Best contact number	er:	Address:Relationship to reference:			
related, volunteer, ar	round working with the pand paid experience you made our groups you are currently		ition abc	out church-	
Have you ever been Have any complaints Have you been conv Within the past 6 mo Have you been conv	s or allegations of misconicted of the possession, ι nths have you abused alo	d of child neglect or abuse? duct involving children ever been made against you? use or sale of drugs? cohol, legal or illegal drugs? affic offense within the last 5 years?	Yes Yes Yes Yes Yes Yes	No No No No No	
n addition to the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of the young people? (Explain)					
information concerni provides information Methodist Church, a information. I waive a information I have pr	ng me. I hereby release a and this release may be nd the officers, employee any right that I may have	verified by contacting persons or organizations that meand agree to hold harmless from liability any person of sent to any reference. I also agree to hold harmless s, and volunteers thereof from any use of this applicate to inspect references provided on my behalf. I certify t; if it is found that the answers given are untrue, I under or youth.	or organi the Pine ation or that the	ization that e Valley	
Signature:		Date:			

SAFE SANCTUARIES PARTICIPATION COVENANT STATEMENT

The congregation of Pine Valley Methodist Church (all campuses) is committed to providing a safe and secure environment for all children, youth, vulnerable adults, and workers who participate in ministries and activities sponsored by the church. The following policy statements reflect our congregation's commitment to preserving this church as a holy place of safety and protection for all who would enter and as a place in which all people can experience the love of God through relationships with others.

- 1. No adult who has been convicted of child abuse (either sexual abuse, physical abuse, neglect, emotional abuse, or ritual abuse) should volunteer to work with children or youth in any church-sponsored activity.
- 2. Adult workers with children, youth or vulnerable adults shall observe the "Two Adult Rule" at all times so that no adult is left alone with children, youth or vulnerable adults on a routine basis.
- 3. All adult volunteers involved with children or youth of our church must have been known to the congregation for at least six months, as a regular visitor or member, before beginning a volunteer assignment.
- 4. Adult workers with children, youth and vulnerable adults shall attend regular training and educational events provided by the church to keep volunteers informed of church policies and state laws regarding child abuse.

Please answer the following questions:

	Printed name and date
d this SAFE SANCTUARIES PAlicies set forth above.	RTICIPATION COVENANT STATEMENT, and I agree to observe and abide
agree to a background check being ☐ Yes ☐ No	grun every 3 years as long as I am in service with Pine Valley Methodist Church
s a representative of this congregate arge of a crime? Yes No	tion, do you agree to inform the Lead Pastor within 24 hours of an arrest or
Comments:	
☐ Yes ☐ No If yes, answer to Date(s) of offense(s)	rested with an offense involving a child, youth or vulnerable adult? the following (use back of form if necessary): Charge(s)
Comments:	
	Charge(s)
•	with any offense in the past five years? the following (use back of form if necessary):
☐ Yes ☐ No	'.1
s a representative of this congregation pervisor?	tion, do you agree to promptly report abusive or inappropriate behavior to your
☐ Yes ☐ No	gillient:
s a representative of this congregate church related to your work assign	tion, do you agree to participate in training and education events provided by
s a representative of this congregat ☐ Yes ☐ No	tion, do you agree to observe the "Two Adult Rule" at all times?
orking in ministries with children, ☐ Yes ☐ No	
	tion, do you agree to observe and abide by all church policies regarding
s a representative of this congre	ga