

PRIMARY SCREENING FORM/APPLICATION FOR CHILDREN OF YOUTH WORKERS

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors. The purpose of this form is to help our church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

PERSONAL

Name: _____ Date: _____
 Last First Middle

Present Address: _____
 Street Address /P.O. Box City Zip

Home Phone: _____ Work Phone: _____ SSN: _____

1. Please indicate the type of your or children's work you presently serve, have served or have the desire to serve: _____

 2. Please indicate the date that you would be available to begin your service as a youth or children's worker: _____
 3. Have you ever been convicted of, pleaded guilty to or *nolo contendere* to a crime?
_____ Yes _____ No (If yes, please explain. Attach a separate page if necessary)

 4. Have you ever been arrested? _____ Yes _____ No
(If yes, please indicate the nature of the offense and the outcome {judicial or non-judicial} along with the dates and location of the arrest.) _____

 5. Were you a victim of abuse or molestation while a minor? _____ Yes _____ No
If you prefer, you may refuse to answer this question, or you may discuss your answer in confidence with the Senior minister rather than answering it on this form. Answering yes, or leaving the question unanswered, will not automatically disqualify an applicant for children or youth work.
 6. Do you have a current driver's license? _____ Yes _____ No

If yes, please list your driver's license number: _____
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CHURCH HISTORY AND PRIOR CHILDREN/YOUTH WORK

7. Name of church of which you are a member: _____
List (names and addresses) of other churches you have attended regularly during the past 5 years.

8. List all previous church work involving youth and/or children's work (list each church's name and address, type of work performed, and dates.)

9. List all previous non-church work involving youth (list each organization's name and address, type of work performed, and dates.)

10. List any gifts, callings, training, education, or other factors that have prepared you for children/youth work: _____

11. Have you ever had a claim from Worker's Compensation? ____ Yes ____ No
If yes, please explain _____

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PERSONAL REFERENCES

(Not former employers or relatives)

Name: _____	Name: _____	Name: _____
_____	_____	_____
Address: _____	Address: _____	Address: _____
_____	_____	_____
_____	_____	_____
Phone #: _____	Phone #: _____	Phone #: _____

**REQUEST FOR CRIMINAL RECORDS CHECK AND
AUTHORIZATION**

I hereby request the Sheriff's Department of Escambia County or any other law enforcement agency to release any information which pertains to any record of convictions contained in its files or in any criminal file maintained on me whether local, state, or national. I hereby release said Sheriff's Department from any and all liability resulting from such disclosure.

Signature

Print Name

Print Maiden Name (if applicable)

Print all Aliases

Social Security Number

Today's Date

RECORDS SENT TO:

Address

APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to provide information that they may have regarding my character and fitness for children/youth work. I further authorize repeated checks if the church deems such as necessary. In consideration of the receipt and evaluation of this application by Pinewoods Presbyterian Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any an all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Constitution and By-Laws, policies, procedures and guidelines of Pinewoods Presbyterian Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement that I have read and understand.

Applicant's Signature

Date

Witness

Date
