

Children's Ministry Adult Volunteer Application

Thank you for your interest in volunteering in our Children's Ministry. Please complete the following application so we can get to know you better. The information you share will be confidential and only given to appropriate pastoral staff. We look forward to serving alongside you!

Age Group you prefer to work with:

Nursery (0-2 years of	l) Toddlers	(2-3 years old)
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Jr Kids (4-5 years old) Elementary (Grades 1-5)

General Information:

Last Name:	First Name:	
Street Address:	City:	
State: Zip Code:		
Email:		
Date of Birth:		
Home Phone: ()	_Cell Phone: ()	
Employer:		
Marital Status: Single Married	l Divorced	
Spouse Name:	Do they serve in a GCC Ministry: Yes	No
Ages of Children:		
Do they attend our Children's Minist	ry? Yes No	

Education: High School: _____ Year Graduated: _____ College: _____ Year Graduated: _____ Lifestyle: Are You a Member of GCC: _____ When did you become a member: _____ How Long Have Attended GCC: _____ Do you currently attend a LifeGroup:_____ Which LifeGroup:____ What other GCC Ministries have you served in:_____ Have you worked with children before? Where? Are there any issues in your life that could have an impact on your commitment and involvement with Children's Ministry (relationships, other commitments, etc.)? _____ If yes, please explain: Is there anything we should be aware of in your life that would compromise the integrity of our church or make it inappropriate for you to serve with children? Yes No If yes, Please explain:

In caring for the children in our ministry, we feel it is our responsibility to seek adult volunteers who will provide healthy, safe, and nurturing relationships. Please answer the following questions honestly. Any specific concerns can be discussed individually with the Pastoral Staff.

Do you use illegal drugs?	Yes	No
Have you ever been treated for drug or alcohol abuse?	Yes	No
What is your view on drinking alcohol?		
Have you ever been arrested and/or convicted of a crime?	Yes	No
Have you ever been accused of and/or convicted of child abu	ise or a cri	ime involving
actual or attempted sexual molestation of a minor?	Yes	No
Have you ever been a victim of abuse, molestation or neglect	t? Yes	No
If yes, what have you done to resolve the experience and mir life?	nimize the	effect in your

Please note: If you do not allow a background check, you will not be able to be considered to work with our children.

Spiritual History:

Have you surrendered your life to Christ?	Yes	No	I'm Not Sure	
Have you ever been filled with the Holy Spirit:	Yes	No	I'm Not Sure	
Would you feel confident and comfortable leading				
a child to Baptism in the Holy Spirit?	Yes	No	I'm Not Sure	
Have you been Baptized in water?	Yes	No	I'm Not Sure	
Have you ever led someone to life in Christ?	Yes	No	I'm Not Sure	

Would you feel confident and comfortable explaining			
to a child what it means to be Baptized in water?	Yes	No	I'm Not Sure
If yes, please describe how you would explain it:			
Please explain how you felt called to serve in our mir	nistry:		

Acknowledgment of Children's Ministry Reporting Policy

acknowledge that I have been advised that it is the policy of the Children's Ministry at Grace Capital Church that all volunteers must immediately report to the Children's Director any information concerning actual or suspected child abuse or neglect which is obtained in the course of volunteering as a Children's volunteer.

If I am uncertain as to whether information I obtain discloses actual child abuse or neglect or would lead to a reasonable suspicion of child abuse or neglect, I will report such information. I am also aware that under the State of New Hampshire Child Protection Act I am required to report any information of abuse and neglect of a child.

I am aware that the State of New Hampshire defines "neglect" as:

- (a) Who has been abandoned by his parents, guardian, or custodian; or
- (b) Who is without proper parental care or control, sustenance, education as required by law, or other care or control necessary for his physical, mental, or emotional health, which it is established that his health has suffered or is very likely to suffer serious

impairment; and the deprivation is not due to primarily to the lack of financial means of the parents, guardian or custodian; or

(c) Whose parents, guardian or custodian are unable to discharge their responsibilities to and for the child because of incarceration, hospitalization or other physical or mental incapacity.

I am aware that the State of New Hampshire defines "child abuse" as:

- (a) Sexually abused; or
- (b) Intentionally physically injured; or
- (c) Psychologically injured so that the said child exhibits symptoms of emotional problems generally recognized to result from consistent mistreatment or neglect; or
- (d) Physically injured by other than accidental means.

I understand that a "child" is any person under the age of 18 years old.

The information contained on this application is correct to the best of my knowledge. I, the undersigned, give my authorization to Grace Capital Church (GCC) or its representatives to release any and all records of information relating to work with minors. GCC may contact references and appropriate government agencies as deemed necessary in order to verify my suitability as a children's volunteer. I understand that the personal information on this application will be held confidential by the professional Church Staff.

I will strive to set a Christ-Like example while working with the children of GCC. I will listen to the adults in charge and follow their instructions of how to lead the children. I will love the kids and serve them to the best of my ability.

Applicant Signature	
Date	