

**MINISTRY PERSONNEL APPLICATION FORM
FOR MINISTRIES TO CHILDREN & YOUTH**

In our desire to reduce the risk of abuse within our church ministries, we believe this information is necessary to protect those who are vulnerable in our church community as well as those who serve them. Thank you for willingness to serve!

Full Name _____

Address _____

Postal Code _____ Email _____

Phone Number (H) _____ (C) _____

Personal History

Please provide a copy of your employment resume and/or list any employers with which you have worked in the past 20 years, including names and addresses of employers, dates, your position, and a contact person.

Hobbies, Interests or Skills

Spiritual History

How long have you attended our Church? _____

Do you regularly attend (2 or more services a month)? Yes No

Are you a member? Yes No

If not, are you willing to attend a membership seminar? Yes No

When did you accept Christ as your Saviour? _____

Have you been baptized? Yes No

If not, are you willing to attend a baptismal seminar?

Yes No

In a brief paragraph, please outline your spiritual journey (you may also use the back side of this form)

List any gifts, training, education or other qualifications that have prepared you to minister with children or youth.

Ministry Information and Experience

Churches I attended in the last five years:

1. Name of Church _____ Phone Number _____

Address _____

Dates Attended _____ Member Adherent

2. Name of Church _____ Phone Number _____

Address _____

Dates Attended _____ Member Adherent

My present and previous ministry experience:

1. Name of Church/Organization _____

Dates and Description of Ministry _____

Pastor or Ministry Supervisor _____ Phone Number _____

2. Name of Church/Organization _____

Dates and Description of Ministry _____

Pastor or Ministry Supervisor _____ Phone Number _____

Ability to Work with Children and Youth

In order to provide a safe and secure environment for our Church's children and youth, we believe it is necessary to include the following questions as part of our application process. All information will be kept confidential by church leadership and the Safe Place team and will not be disclosed by the church unless required by law. Answering yes to any of the questions may not necessarily prevent you from volunteering with the church. Thank you in advance for your understanding.

1. Are there any circumstances involving your lifestyle or history that could call into question your ability to work safely with children/youth in a Christian environment? Yes No
(e.g. pornography, use of illegal substances, etc.)

2. Have you ever been convicted or found guilty of a criminal offence for which a pardon has not been granted? (Note: this doesn't include minor traffic violations) If yes, please list offence(s) and date(s) of conviction: Yes No

3. Have you ever had your employment terminated by any organization or employer for assault or violence against any person, or for assault, violence or impropriety with children, youth or vulnerable persons? (e.g. senior citizens or persons with disabilities) Yes No

4. Have you been investigated by the Child Family Services or another organization for suspected child abuse? Yes No

5. Have you ever been a defendant or respondent in a civil lawsuit rights complaint or other legal proceedings in which you were alleged to have abused or engaged in violence, harassment or other immoral or illegal behaviour or conduct involving children, youth or vulnerable persons? Yes No

6. Do you have any health concerns which would impact your ability to perform the functions of the volunteer position for which you are applying? (Such health concerns may not prevent you from holding the position for which you have applied) Yes No

References

Please provide the names of three individuals, excluding relatives, who could provide a reference for you. Include at least one reference from outside the church.

1. Name of Reference _____ Day Phone _____

How long have you known this person: _____ Evening Phone _____

Address _____

Nature of Relationship _____

2. Name of Reference _____ Day Phone _____

How long have you known this person: _____ Evening Phone _____

Address _____

Nature of Relationship _____

3. Name of Reference _____ Day Phone _____

How long have you known this person: _____ Evening Phone _____

Address _____

Nature of Relationship _____

I commit to not knowingly teach against the MB Confession of Faith

Print Name _____ Signature _____

I hereby declare that all the information is true and complete to my knowledge

Signature _____ Date _____