

Wellford Baptist Church
Adult Volunteers and Employees in Children/Youth Ministries
Safety Application Form
CONFIDENTIAL

This application should be completed by all applicants for any position (volunteer or employment) involving the supervision of children or students. The purpose of this form is to assist in the creation of a safe environment for children or students who participate in the programs of Wellford Baptist Church or use Wellford Baptist Church facilities.

Name: _____ Date: _____

Address: _____

Phone: _____

Drivers License # _____ SS# _____

Sex: _____ M _____ F Date of Birth: _____

Marital Status: _____ (*single, married, separated, divorced, widowed, etc.*)

How long have you lived at your current address? _____

Previous address: _____

List all other cities and states where you have lived as an adult:

Please list *all previous volunteer work or employment* involving children or students (List each organization's name and address, type of work, dates, and a **contact person** familiar with your work there. **Use back of this page for more space, if necessary.**)

List any talents, vocations, preparation, training or other experiences that have equipped you to work with children or students:

Because we care for children and desire to protect them, please answer the following questions. We understand that the answers to these questions may be private and deeply personal, and we will protect your privacy in every possible context. It is the position of Wellford Baptist Church that suspicions or allegations of child abuse or neglect will be reported to relevant state authorities.

Why do you want to work with children or students at Wellford Baptist Church?

Do you have a preference concerning the age group or sex of children or students with whom you would like to work? If so, what is the basis for this preference?

What is your philosophy concerning re-direction or discipline of children?

When you are unhappy, angry or emotional about a person or circumstance, what do you do?

Have you ever physically or sexually abused a child?

Has someone ever accused you of physically or sexually abusing a child?

Do you consider yourself to have been physically or sexually abused as a child? **Yes/No**

(We realize this information is potentially sensitive, and it will be kept entirely confidential, where another child's safety is not negatively impacted by confidentiality.)

If you answered 'yes' to this question, would you consider counseling or resources (available through the Wellford Baptist Church) to address any resulting emotional or spiritual harm or damage?

Please complete the reference form below, providing three references - one professional reference (if applicable) and one family member. References must include one member of the same sex and one member of the opposite sex. Please contact these references and inform them an authorized Wellford Baptist Church staff person will be contacting them.

REFERENCE FORM FOR VOLUNTEERS

Name	Address	Telephone
<p>Professional Reference:</p> <p><i>Email:</i></p>		
<p>Personal Reference:</p> <p><i>Email:</i></p>		
<p>Family Member:</p> <p><i>Email:</i></p>		

RELEASE

I authorize Wellford Baptist Church to contact all individuals, organizations and references listed on this **Safety Application Form** to verify the information I have provided. I agree to release from liability any person or organization providing information related to me, including those persons I have listed as references, as well as contact persons from my previous volunteer work or employment with children.

I specifically authorize Wellford Baptist Church to undertake a criminal background check concerning my past.

I understand and agree that any information received from the background check and application verification will not be disclosed to me except as required by law, and I hereby waive any right I may have to inspect any information provided about me by any person or organization identified by me on this form.

By signing this form, I certify and affirm that the information I have given on this form is true, complete, and correct in all respects.

Signature: _____ Date: _____