

If yes, please provide a brief explanation.

The covenants between persons seeking authorized volunteer positions in the church require honesty, integrity, and truthfulness for the health of the church. To that end, I attest that the information set forth in this application is true and complete. I understand that any misrepresentation or omission may be grounds for rejection of consideration for, or termination of, the position I am seeking to fill. I acknowledge that it is my duty in a timely fashion to amend the responses and information I have provided if I come to know that the response or information was incorrect when given or, though accurate when given, the response or information is no longer accurate.

Beginning such relationships with an open exchange of relevant information builds the foundation for a continuing and healthy covenant between volunteers and the church they seek to serve. To that end, I authorize (name of Local Church) and/or its agents to make inquiries regarding my character and qualifications, including all statements I have set forth above. I also authorize all entities, persons, former employers, supervisors, courts, law enforcement, and other public agencies to respond to inquiries concerning me, to supply verification of the statements I have made, and to comment on and state opinions regarding my background, character, and qualifications. To encourage such persons and entities to speak openly and responsibly, I hereby release them from all liability arising from their responses, comments, and statements.

(name of Local Church) authorized volunteer recruitment process involves the sharing of information regarding applicants with those persons in a position to recruit, secure, and supervise both the position I am seeking to fill and program I am seeking to participate in. To that end, I authorize (name of Local Church) and its agents to circulate, distribute, and otherwise share information gathered in connection with this application to such persons for these purposes. I understand that (name of Local Church) will share with me information it has gathered about me, if I request it to do so.

I acknowledge my receipt and understanding of the (name of Local Church) Safe Church Policy.

(PRINT NAME & SIGN)

DATE

(PRINT NAME & SIGNATURE OF PARENT OR GUARDIAN FOR APPLICANTS UNDER 18)

DATE

- Sex Offender Registry (www.nsopr.gov) review performed on _____
- Personal interview conducted by staff on _____
- Reference inquiries completed on _____