

Church History and Prior Youth Work

Have you accepted Jesus as your Savior? Yes No

When? _____

How long have you been attending VCNP?

Have you volunteered with Vineyard Kids in the past? Yes No

When? _____

I have taken the Newcomers Class Yes No

I have taken the Ministry Training Class Yes No

I have taken the S.H.A.P.E. Class Yes No

I currently attend a small group Yes No

Name of Leader _____

List (name and address) other churches you have attended regularly during the past five years:

List all previous church work involving youth (list each church's name and address, type of work performed, and dates):

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

List any gifts, callings, training, education or other factors that have prepared you for children's ministry:

The information contained in this application is correct to the best of my knowledge. I hereby authorize VCNP and its designated agents and representatives to conduct a comprehensive review of my background, causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer

purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to, the following areas: verification of social security number; current and previous residences; employment history; education background; character references; drug testing; civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records; birth records; and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to VCNP or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have to include information or data received from other sources.

I hereby release VCNP, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

I authorize VCNP to use said information as a basis for evaluating my request to serve in their children's/youth ministries. Should my application be accepted, I agree to be bound by the policies of VCNP, 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 which I have read and understand.

Signature: _____ Date: _____