

VOLUNTEER APPLICATION—GWINNETT COMMUNITY CHURCH

To protect vulnerable people and to be protected from liability, the church must take reasonable action in screening and supervising the volunteers involved in any work with children, youth, or other vulnerable people. Therefore, every prospective ministry volunteer and leader will be asked to complete the volunteer application form.

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Birth Date: _____ Gender: Male Female Single Married Widowed Divorced

Address: _____ City/State: _____ Zip Code: _____

Home Number: _____ Business Number: _____ Cell Number: _____

E-Mail Address: _____

How long have you been attending GCC? _____

(If less than 6 months, name of previous church) _____

Driver's License Number: _____ State Issued: _____ Expiration Date: _____

Preferred way to be contacted: Phone E-mail Best time to contact: _____

What ministries do you participate in at GCC? _____

Please write a brief statement of how you became a Christian

References (please give two references in each of the categories listed below)

Personal Reference: _____ Years Known: _____ E-mail: _____

Address _____ Phone Number _____

Personal Reference: _____ Years Known: _____ E-mail: _____

Address _____ Phone Number _____

Christian Reference: _____ Years Known: _____ E-mail: _____

Address _____ Phone Number _____

Christian Reference: _____ Years Known: _____ E-mail: _____

Address _____ Phone Number _____

Please note: copy of front page(only) will be provided to Ministry Head.

The questions listed below are part of our screening process in order to help provide a safe and secure environment for our children. All information is held in strict confidence by GCC. Answering "yes" to any of the questions may not necessarily preclude your involvement as

a volunteer. Thank you for your understanding.

Have you been a victim of physical, emotional, or sexual abuse? Yes No

(Would you like to meet with someone regarding this circumstance?) Yes No

Have you ever been arrested for a criminal offense excluding minor traffic violations? Yes No

Have you ever been accused, arrested, or convicted for any sexually related crimes? Yes No

Have you ever been accused, arrested, or convicted for any abuse related crimes? Yes No

Are there any circumstances involving your lifestyle and/or your background that would call into question your ability to work with children? Yes No

If you answered "yes" to any of the above questions, please explain on a separate page.

Gwinnett Community Church is committed to providing a safe and secure environment for all who enter our doors and participate in ministries and activities associated with our church. We therefore require that all who either serve or who are employed by GCC undergo a criminal background check and renew that check every two years.

We know this can seem a bit daunting and/or intimidating, but it is a necessity in the world in which we live. The information asked for is confidential and we want to assure you that it is kept secure.

APPLICANT VERIFICATION AND RELEASE

I agree to be bound by the bylaws, constitution and policies of Gwinnett Community Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I recognize that Gwinnett Community Church to which this application is being submitted is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I authorize the organization to contact any person or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release the organization and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize Gwinnett Community Church to conduct a criminal background check. I understand that I may request a copy of the background check.

Printed name: _____
Signature: _____ Date: _____