APPLICATION FOR CHILDREN'S/YOUTH MINISTRY (CONFIDENTIAL)

This is part of the application process to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors. The purpose of this part of the process is to further ensure a safe and secure environment for those children and youth entrusted by God to the ministries of SMCC and who use our facilities. We must ask you some personal questions, which are unfortunately essential in today's world. Your responses will be kept confidential within the pastoral staff and commission related to the recruiting process. (If your responses exceed the space provided, please use the back side of each sheet.)

Today's Date:		Home Phone:			
			Work Phone:		
Name					
Present Add	lress				
Marital Stat	tus Social Security #				
Member of	SMCC? Yes	No	If no, where?		
What type of	of children's/youth mini	istry do you pre	fer?		
				u wish to work? (spiritual, skills	
On what da	te are you available?				
Maximum l	ength of your commitm	ient			
children of automatical	the finest staff and care	we can provide the joy of service	e. Your affirmati e, but will help	our church family, parents, and ive response, if necessary, does us better know how to work wi	not
	ou any physical handica to children's/youth worl			from performing the activities please explain:	
				ence, child abuse, child molesta If yes, please explain:	ition,
	rize the church to obtair nt, so long as the results	1		rds check if it is thought to be No	

(continued)

APPLICATION, continued

I have read the	attached pro	ocedures for	working with	minors at	SMCC and	pledge to suppo	ort them as	I
minister. Yes	No							

List other churches you have attended regularly during the past seven years. (If no churches, please list any schools and organizations where you have worked with children or youth.)

Church Name 1	2
Street Address	
City/State/Zip	
Years Attended	
Type of children's or youth ministry you did:	
List at least two personal references who are not former co	o-workers or relatives.
Name 1	2
Street Address	
City/State/Zip	
Years Attended	

Personal Commitment

The information contained in this personal reference form is correct to the best of my knowledge. *I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children's/youth work*. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf.

Should my application be accepted, I agree to be bound by the bylaws and policies of Sierra Madre Congregational Church, and to refrain from unscriptural conduct in the performance of my services on behalf of the church. Sierra Madre Congregational Church commits to supporting you in your appointment with affirming supervision and ongoing training, as together we serve Jesus Christ anti share in His love with our children and youth.

Applicant's Signature	Date
Witness	Date
(Departmental minister)	

(Bylaws and policies of Sierra Madre Congregational Church are available in the business office.)