Application for Child/Youth Workers

This application is to be completed by all applicants, for any position (volunteer or compensated) involving the supervision or custody of minors. This is being used to help The Bridge Church (TBC) provide a safe and secure environment for those children and youth who participate in our programs. This application will be reviewed only by responsible parties and will be kept on file in a secure location.

	Date		
Full Legal Name			
Last	First FULL N		<mark>.L</mark> Middle
Maiden Name or other names used			
Current Address			
Street		Zip	County
Previous Address			
Street	City/State	Zip	County
Home Phone	Cell Phone		
Social Security Number	Birthdate _	irthdate	
Driver's License #	State of Issue _	State of Issue	
Email:			
Previous Church(es) attended:			
List any personal gifts, experiences, or sk	xills that have prepared you for worl	k with children/y	outh:
List by name, street address, and phone	number two references (1 – co-wor	ker/employer, 2	– personal friend
Is there any fact or circumstance about yof entrusting you with the supervision, go		call into questior	the advisability

Have you ever been hospitalized or treated for alcohol or substance abuse? 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 abuse related crimes? Yes / No
Have you ever been accused, arrested, or convicted for any sexually related crimes? Yes / No
Do you use illegal drugs? Yes / No

*If you answered YES on any of the questions above, please give a complete explanation on the reverse side of this form.

Attest Statement

Under penalty of perjury, I swear or affirm that the information given above is true, complete and correct. I understand and agree that a complete background investigation, including criminal records and driving record, will be conducted with respect to me, and that this information may be verified by contacting persons and organizations with whom I have had contact or which may have information concerning me. I hereby release and agree to hold harmless from liability any person or organization that provides such information. I also agree to release and hold harmless The Bridge Church, their officers, employees, agents, and volunteers.

I hereby authorize The Bridge Church to make an independent investigation of my background, references, character, past employment, education, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my qualifications as a volunteer or for employment now, and if applicable, during the tenure of my volunteering or employment with The Bridge Church. I release The Bridge Church and any person or entity which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

Signature	Date