

Criminal and Driving Record Information Disclosure and Consent

By my signature below, I authorize Crossroads Fellowship to obtain information – written, oral or other - from a consumer reporting agency bearing on my character, general reputation, personal characteristics, mode of living, criminal background, and driving background. I understand that this investigation may include interviews with friends, acquaintances, or others who may have relevant information and that this report will be used for volunteer ministry purposes including evaluating me for further opportunities promotion, reassignment, or retention as a volunteer of Crossroads Fellowship.

Signature	Date		
Last Name	First Name	Middle Name	Maiden Name

Street Address _____

City, State, Zip Code _____

Alias (other names you have gone by) _____

Social Security Number	Date of Birth
------------------------	---------------

Driver's License Number and State _____

PHONE NO. _____ EMAIL: _____

City/Counties in which you have lived in within the past 5 years:

City	County	State	Years There (From/To)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Area of Ministry (please check): KIDS CHURCH ____ YOUTH ____ SECURITY ____ OUTREACH ____
LIFE GROUP LEADER ____ PARKING ____ VALET PARKING ____

CONFIDENTIAL QUESTIONNAIRE

As caretakers of children, Crossroads Fellowship has a responsibility to provide a safe and secure environment for those children who participate in our programs and use our facilities. The following questions are necessary, but are in no way meant to offend or embarrass anyone. Answering "yes" to any of these questions will not automatically disqualify you for ministry work. This questionnaire will be read by only one or two people and will be kept in a highly confidential file. Thank you.

Name _____ Maiden Name (if applies) _____

Texas Driver's License # _____ SSN # _____ Birthdate _____

Have you ever been dismissed from any youth or childcare position as a paid worker or volunteer? _____
If yes, explain (give date and place) _____

Have you ever been arrested? _____ Yes _____ No

Have you ever been convicted of or pleaded guilty to a crime and/or felony? _____ Yes _____ No
If yes to either question, explain (give date and place) _____

Have you ever served time in prison or jail? _____ Yes _____ No If yes, when? _____ How long? _____

Were you a victim of abuse or molestation while a minor? _____ Yes _____ No
If yes, explain (if you prefer, you may discuss your answer in confidence during your interview) _____

Have you ever been accused of and/or convicted of child abuse or a crime involving actual or attempted molestation of a minor? _____ Yes _____ No If you answered yes, please explain: _____

Have you ever had psychotherapy or counseling? _____ If yes, explain (give date) _____

Describe any present health problems or handicaps: _____

Have you been involved in homosexual activity within the last 5 years? _____ Yes _____ No

Have you ever had an infectious, contagious, or any communicable diseases such as hepatitis, HIV, or tuberculosis? _____ Yes _____ No (If yes, explain): _____

Do you use tobacco, alcohol, or illegal drugs in any form? _____ Yes _____ No

If yes, please explain _____

As an applicant for a volunteer position at Crossroads Fellowship, and its ministries, I recognize, understand and adhere to the moral and ethical standards and mandates of said ministry, I further declare that with regard to my personal, moral and ethical character and conduct of this date, I am not, nor have been in the past engaged in inappropriate conduct that includes the following: verbal, physical, or sexual abuse as defined by State law, or homosexuality as defined by Scripture.

By affixing my signature, I declare that I meet the moral and ethical standards of Crossroads Fellowship.

Signature

Date