Staff Application Renewal

Alaska Ministry Network

In order to provide the safest possible environment in which our children and youth can experience God, all workers attending or assisting at any Alaska Ministry Network camps involving minors must be screened. A complete application, described below, must be on file 2 weeks before the event. If you have lived outside the United States, a longer processing time is required, up to a month.

Please note that Parts 1, 2, and 4 of this application must be received by the Alaska Ministry Network office at least 2 weeks prior to the event. If the application is received after the two week deadline, there is no guarantee that the forms will be processed in time for the event. In order to be processed, \$10 must be sent with this form to pay for the criminal records check.

- 1. The first section entitled "Staff Application | Part 1" must be filled out for every staff person and turned into our office.
- 2. The second section entitled "Staff Application | Part 2" must be signed by your pastor and included with "Staff Application | Part 1" to show that your church has done their due diligence to properly screen you.
- 3. The third section entitled "Volunteer Screening Form | Part 3" is to be completed only by applicants who do not have a written application on file at their local church. This is to be retained by your church.
- 4. The fourth section entitled "Staff Application | Part 4" is to be completed and turned in to our office with Part 1 and 2. This is an authorization to run a criminal records check, which is required for all camp workers. This part of the application is not necessary for workers who are minors.

If you have any questions please contact us at:

Youth Ministry | Ryan Gluth

Call: 907-747-5848

Email: ryan@alaskaag.org

Children's Ministry | Pam Hodges

Call: 907-952-4618

Email: pastorpam7@gmail.com

Royal Rangers | Chuck Niemann

Call: 907-952-2905 Email: chuxn@gci.net

Camp AN | Jim Schulz

Call: 907-278-4567

Email: jimschulzalaska@gmail.com

Staff Application | Part 1

Alaska Ministry Network

PERSONAL

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors in any scheduled program or activity of the Alaska Ministry Network of the Assemblies of God. It is being used to help provide a safe and secure environment for those children and youth who participate in scheduled children's and youth activities of the Alaska Ministry Network of the Assemblies of God.

Please note that no smoking, alcohol, or recreational drug use is permitted at any Alaska Ministry Network event.

Date:					
Name:					
Present Address:			City	State	Zip
Home Phone: ()	Age:	Email:		
Which event are you	ı initially applying	to work at?			
Have you ever been	convicted of or p	leaded guilty to a ci	rime? Yes No	If yes, please	explain
(attach a separate p	age,if necessary)	:			
CHURCH HISTORY	AND PRIOR YO	IITH/CHII DREN'S	WORK		
Address:	Number	Street	City	State	Zip
Church Phone Num			· ·		—·r
List other churches performed; (Attach		if necessary.)	ne past 5 years and the ty Church 2	pe of all previous w	·
Church Name					
Address					
City					
State Zip					
Phone #					
Type of work					
performed					
	L	L			

Volunteer Screening | Part 2

Church Leader Certification

CHURCH LEADER CERTIFICATION

Because of the large number of applicants, great reliance is placed on the certification of each applicant's pastor that there are no facts or allegations that raise any question concerning an applicant's suitability for working with minors. It is also important that the local church has screened each applicant with a process including an application, reference check, and interview. When checking references, call organizational references such as churches, youth organizations, or other individuals who have observed the person working with minors.

I certify that:

Our church has completed two references checks on this worker, and the documentation is on file at the church. In addition, I, or another church representative, have completed an interview with the worker to determine their suitability to work with minors. Based upon the application, reference checks, interview, and any knowledge I may have, I know of no reason why this individual should not work with minors.

Legible Signature	
Printed Name	
Pastoral Staff Member	
Advisory Board Member	
Senior Pastor	
(check one)	

Volunteer Screening Form | Part 3

To Be Retained by the Local Church

CONFIDENTIAL

This application is to be completed by all applicants for any position (volunteer or compensated). This is not an employment form. Persons seeking a position in the church or as a paid employee will be required to complete an employment application in addition to this screening form. This form is being used to help the church and/or Alaska District of the Assemblies of God provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

PERSONAL					
Date:					
Name:					
Present Address:	Number Street		City	State	Zip
			J.,	Clair	—·P
Home Phone: ()_	A	.ge:			
Have you ever been	convicted of or pleaded guil	ty to a crime? Yes	No	. If yes, please	explain
(attach a separate pa	age,if necessary):				
CHURCH HISTORY	AND PRIOR YOUTH/CHILI	DREN'S WORK			
Name of Church Reg	gularly Attend				
Address:					
Church Dhana Numb	Number Street		City	State	Zip
Church Phone Numi	per				
	ou have attended regularly on separate sheet if necessary		rs and the type	of all previous w	ork you
	Church 1	Church	2	Church :	3
Church Name					
Address					
City					
State 7in					
Type of work					
performed					
		1	1		

List all previous non-church work involving children or youth:

	Organization	Organization 2	Organization 3
Name			
Address			
City			
State Zip			
Phone #			
Type of work performed			
Dates			
List any gifts, callings,	, training, education, or other	factors that have prepared you	for children or youth work:
-			

PERSONAL REFERENCES N	lot former employers or relatives			
REFERENCEONE				
NameFirst	Last			
	Lasi	Apt #		
	State			
Home Phone #	Work Phone #			
REFERENCE TWO				
NameFirst	Last			
	Last	Apt #		
	State	·		
Home Phone #	Work Phone #			
references or churches listed in t regarding my character and fitnes application, I hereby release any ir or any other person or organization all liability for damages of whateven account of compliance or any att inspect any information provided at Should my application be	ed in this application is correct to the best of this application to give any information (includes for children or youth work. In consideration condividual, church, youth organization, charity, each, including record custodians, both collectiver kind or nature which may at any time restempts to comply, with this authorization. I was about me by any person or organization identificance of the bound by the Bylaws and or the performance of my service on be	ling opinions) that they may have of the receipt and evaluation of this employer, reference, district, camp, ely and individually, from any and sult to me, my heirs, or family, on aive any right that I may have to fied by me in this application.		
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. Applicant's Signature Date				

Staff Application | Part 4 Alaska Ministry Network

AUTHORIZATION AND REQUEST FOR CRIMINAL RECORDS VERIFICATION

I,	ation regarding any record of charges or d on me, whether said file is a local, state, or evictions for crimes committed against minors, to . I do release said entities from all liability that quest. I may revoke this request at any time, but me.
Name as it appears on Driver's License(Last):	Name (First):
Address:	
Other Names used by Applicant (If any):	
Date of Birth:	
Place of Birth:	
Social Security Number:	
Application will not be processed until payment of	f \$10 is received.
For Office Use Only	
Part 1 Complete: Y/N Part 2 Complete: Y/N Part 4 Complete: Y/N	Criminal Records Check Ran: Y/N Application Approved/Denied Payment Received: \$ Online OR Check #