

**First Baptist Church of Indian Rocks
& Indian Rocks Christian Schools**

a Ministry of FBCIR

12685 Ulmerton Road • Largo, Florida 33774
Phone (727) 595-3421 • Fax (727) 595-6346

FOR SCREENERS USE ONLY:

Received by _____ Date _____
 Approved _____ Date _____
 Deferred _____ Date _____
 Conditionally Approved _____
 Screener _____

Confidential

Volunteer Information and Screening Form

We are excited to have you involved in an area of ministry that will use your talents and spiritual gifts for the Lord. In order for us to responsibly provide a safe environment for our children and youth who participate in programs, we are obligated to request some specific information. This application is to be completed by all applicants for any position (volunteer or compensated) involving interaction with the supervision or custody of minors. This is NOT an employment application form. Persons seeking a position in the church/school as paid employees are required to complete an employment application in lieu of this Volunteer Information and Screening Form. This form is being used to assist the church/school in providing a safe and secure environment for those children and youth who participate in our programs and have access to our facilities. All volunteers working with youth or children must be a member of FBCIR for a minimum of six months, or may apply for an exception by providing a pastoral recommendation from their most recent church relationship.

† PLEASE READ AND COMPLETE FRONT AND BACK OF BOTH SHEETS THOROUGHLY †

† Parents are required to supply the following information for IRCS Students

Child's Name _____ Grade _____ Teacher _____

Child's Name _____ Grade _____ Teacher _____

† Ministry Area Request: Nursery/Preschool IRCS (Elementary) IRCS (Middle)
 IRCS (High) FBCIR Middle School/High School Ministry Lay Ministry Thrift Center
 FBCIR Children's Ministry Other Ministry _____

Name _____ Home Phone _____

Last

Middle

First

Maiden Name (if applicable) _____ Work Phone _____

Address _____

City _____ State _____ Zip _____ Birth Date _____

Place of Birth _____ Social Security # _____

Spouse's Name _____ Social Security # _____ Birth Date _____

School you currently attend, if any _____

Place of Employment, if any _____ Retired? _____

Job Title _____

† What type of ministry related functions do you prefer to be involved in? _____

† Please list any education or work training you have had that might be helpful for us to know (For example: High School Diploma, College Degree, Bible School courses, etc.) _____

† Do you speak any foreign languages? Yes No If yes, please list: _____

† Please list any ministry experience, work experience, job skills or hobbies you have had that might be helpful for us to know. (You may attach resume, if available) _____

† Are you **currently** involved in any area of ministry/volunteer? Yes No
If yes, please describe _____

† What date would you become available? _____

† What hours are possible for you to serve with the church?

MON: Not Available Available Any Hours Only Available Specified Hours: _____

TUES: Not Available Available Any Hours Only Available Specified Hours: _____

WED: Not Available Available Any Hours Only Available Specified Hours: _____

THURS: Not Available Available Any Hours Only Available Specified Hours: _____

FRI: Not Available Available Any Hours Only Available Specified Hours: _____

SAT: Not Available Available Any Hours Only Available Specified Hours: _____

SUN: Not Available Available Any Hours Only Available Specified Hours: _____

† Estimated time of commitment? _____

DRIVING RECORD (YOU MUST ATTACH A COPY OF YOUR DRIVER'S LICENSE OR PHOTO I.D.)

† Do you have a valid current driver's license? Yes No Do you have a Chauffeur's license? Yes No
If yes, please list your driver's license number: _____

† Have you been involved, charged, fined, or convicted of a traffic violation or a vehicle accident within the last three years? Yes No
If yes, please describe all charges, fines, or convictions for the past five years: _____

OFFENSE RECORD

† During your lifetime, have you ever been accused, convicted or pleaded guilty of child molestation, child abuse, assault, lewdness, or sex offenses of any nature? Yes No
If yes, please explain the nature of the accusation, charge or conviction: _____

† Have you ever been accused, convicted, or pleaded guilty to any other crime? Yes No
If yes, please explain: _____

CHURCH ACTIVITY

† Are you an active member of this church? Yes No
If yes, how long have you been a member? _____

† Are you an active non-member of this church? Yes No
If yes, how long have you been associated? _____

† Name of other church of which you are a member: _____
How long have you been a member? _____

† Address of other church of which you are a member: _____

† List (name and address) additional churches you have previously attended during the past five years:

NAME	ADDRESS	CITY	STATE	ZIP

† List all previous church responsibilities (indicate whether *paid* or *volunteer*):

TYPE OF WORK	CHURCH

† List any gifts, callings, training, education or other factors that have prepared you to serve as a ministry volunteer: _____

† **PERSONAL REFERENCES** (not former employers or relatives)

1. Name _____ Address _____
City _____ State _____ Zip _____ Telephone _____

2. Name _____ Address _____
City _____ State _____ Zip _____ Telephone _____

† **LOCAL CHURCH/SCHOOL REFERENCES** (Pastor, Bible & Life Group Teacher, Youth/Young Adult Pastor, Church Employee/Member) **Note: Volunteers 14-21 years of age MUST include a Bible & Life Group Teacher or Youth/Young Adult Pastor*

3. Name _____ Address _____
City _____ State _____ Zip _____ Telephone _____

4. Name _____ Address _____
City _____ State _____ Zip _____ Telephone _____

† APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize ALL references and/or churches/schools listed in this form (but not limited to this form) to give you any information (including opinions) that they may have regarding my character and fitness for interaction with or assignment to children or youth work. In consideration of the receipt, processing, and evaluation of this form by First Baptist Church of Indian Rocks/Indian Rocks Christian Schools, I hereby release FBCIR/IRCS, their officers, pastors, employees, members, agents, or representatives, employer, reference, or any other church, church employee or member, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization.

I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

I further waive all rights and claims, and release FBCIR/IRCS, their officers, pastors, employees, members, agents, or representatives, both individually and collectively, from any and all liability or damages which may accrue to me from any injury or physical labor associated with my volunteer involvement in any church/school ministry or activity.

Should I be approved for volunteer work with children, or youth, or any other area of First Baptist Church of Indian Rocks/Indian Rocks Christian Schools ministries, I agree to support the bylaws and policies of First Baptist Church of Indian Rocks/Indian Rocks Christian Schools and that I am required to abide by all rules and regulations governing the ethical, moral, and religious values of the organization.

I understand that this information is confidential and will be made available only to responsible staff and ministry leaders at this church/school or its agents on a need to know basis.

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.

I have enclosed a copy of my Driver's License or Photo I.D.

I have completed all four (4) sides of the Confidential Volunteer Information and Screening Form thoroughly and completely.

Applicant's signature _____ Date _____

If applicant is under 18 years of age, a parent/guardian is also necessary.

Parent/Guardian _____ Date _____