

**VOLUNTEER APPLICATION**

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City Zip

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Best time to be contacted \_\_\_\_\_

Number of hours available per week \_\_\_\_\_ Prefer: AM PM

Best Day(s) to serve: Mon Tues Wed Thurs Fri Sat Sun

Position applying for \_\_\_\_\_

Do you consider GC your church home? \_\_\_\_ Yes \_\_\_\_ No Length of attendance \_\_\_\_\_

Church positions held in the past \_\_\_\_\_  
\_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Full-time / Part-time

What skills, spiritual gifts, or talents do you have which might be useful in this position?

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What training or experiences do you have which might be useful in this position?

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If you could do anything for God without fear of failure, what would it be?

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Have you been convicted of a criminal offense?

If YES, please explain

Yes

No

Have you been convicted of child abuse or sexual abuse or been involved in any activities related to molesting or abusing children/youth?

If YES, please explain.

Yes

No

What moving violations are on your driving record? Please list and explain.

References: (Please provide the names and phone numbers of three references.) If possible, include someone who attends GC and someone you have volunteered with previously. References may include **no more** than one family member.

I certify that all information provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration, and may result in my removal if discovered at a later date.

I have read GC's Volunteer Handbook and agree to follow and abide by these guidelines during my service at the church. I understand that it is my responsibility to review new guidelines that are created and distributed as well as guidelines that are changed or deleted.

For an online version of the GC Volunteer Handbook, please visit the link below:

<http://generationschurch.com/wp-content/uploads/2017/06/GC-Volunteer-Handbook.pdf>

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please note that prior to being assigned to a volunteer position, an interview with the Connections Coordinator and/or Ministry leader and a completed Volunteer Background Check is required.**

**If you prefer to complete an online background check instead of the attached paper version, please check here \_\_\_\_\_ and a link will be sent to your email once your application has been submitted.**

For Office Use Only: \_\_\_\_\_ Next Steps \_\_\_\_\_ BG \_\_\_\_\_ HB \_\_\_\_\_ REF



## Volunteer Background Check Consent

This form authorizes the church to obtain background information and must be completed by the applicant. The church must keep this completed form in a confidential file for at least three years after requesting a background check.

I, the undersigned applicant (also known as the "volunteer"), authorize Generations Church to procure background information about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state of sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Generations Church, if such is made within a reasonable time from the date it was produced.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Volunteer Position for which you are applying \_\_\_\_\_

### Identifying Information for Background Check

#### **Please Print Clearly**

Print Name \_\_\_\_\_  
First Middle Last

Other Names Used (alias, maiden, nickname) \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street/PO Box City State Zip Code County Dates

Former Address \_\_\_\_\_  
Street/PO Box City State Zip Code County Dates

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Email Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Best Contact Number \_\_\_\_\_