



HURT PENTECOSTAL HOLINESS CHURCH

"PRESENTING A CHANGELESS CHRIST TO AN EVER CHANGING CULTURE"

1212 Grit Road - Hurt, VA 24563 www.hurtphchurch.org

Children/Youth Volunteer Ministry Form

Please print and use black or blue ink.

SECTION I		Personal Information	
Name:		Email:	
Address		City	State
Cell Phone:	Work Phone:	Position(s) of interested:	
Are you a member of Hurt PHC?			
<input type="checkbox"/> Yes If yes, how long ____ yrs. ____ mos. <input type="checkbox"/> No			
Churches of which you have been a member in the last 5 years:			
Name of Emergency Contact & Relationship:			
Cell Phone:			
SECTION II		Health Information	
Please list any injury/disability/health factors that might limit your involvement in ministry activities, or impact the health of children (i.e., communicable diseases, physical limitations, etc.). Please use additional sheet(s) if needed.			
SECTION III		Previous Experience	
Have you worked in children or youth ministry before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If so, which one(s): <input type="checkbox"/> Nursery <input type="checkbox"/> Toddlers <input type="checkbox"/> Kindergarten <input type="checkbox"/> Primary			
<input type="checkbox"/> Juniors <input type="checkbox"/> Youth/Teens <input type="checkbox"/> Boy's Ministries <input type="checkbox"/> Girl's Ministries			
<input type="checkbox"/> VBS <input type="checkbox"/> Other _____			

SECTION IV**Personal References**

Please list below three individuals (other than family members) who could recommend you for this ministry position:

Name	Street Address	City/State	Zip	Phone
1.				
2.				
3.				

SECTION V**Background**

Date of Birth: Sex: Race: Social Security #:

Driver's License #: State: Exp. Date:

As a result of our concern for the safety and protection of children and youth, we ask all volunteers to 1) complete and return this form, 2) consent to a voluntary criminal record check, and 3) read & agree to follow the **Safe Sanctuaries Policy**.

Have you ever been convicted of a felony? Yes No

Have you been denied legal custody of your children in any legal proceedings, including divorce decrees or settlements?

Yes No

Have you ever been accused of, charged with, disciplined for, or convicted of any unlawful sexual conduct, abuse, child abuse, child neglect, and/or child sexual abuse?

Yes No

Have you ever been required to register as a sex offender in any jurisdiction?

Yes No

Have you ever been accused of, charged with, disciplined for, or convicted of any crime involving possession or use of illegal drugs?

Yes No

If you answered yes to any of the above questions, please use additional sheet(s) and supply the date, place, type of conduct, disposition, and any sentences, as applicable.

SECTION VI**Volunteer's Statements**

The information contained in this form is current to the best of my knowledge. I understand that this is strictly a volunteer position, and I expect no remuneration for services and time volunteered.

I authorize any persons giving a reference or churches listed in this form to disclose information that they may have regarding my character and fitness for serving in a volunteer ministry that may involve children or youth. I hereby release any individual, church, or organization from any and all liability for damages which may result to me, my heirs, or family for compliance with this authorization, and agree that the church may maintain this information.

My signature on this form confirms my understanding and agreement that: In the event that allegations of criminal or sexual misconduct arise regarding my conduct while I serve in a volunteer capacity, the church will fully cooperate with any investigation. I further state that I have carefully read the foregoing release and understand the contents thereof, and that I sign this release as my own free act. This is a legally binding agreement, which I have read and understand.

I have read and agree to follow the **Safe Sanctuaries Policy** and I give my consent for Hurt PHC to solicit and conduct criminal records and background checks.

I agree not to post any comments on any social media site (i.e., Facebook) that could potentially be interpreted negatively in any regard concerning the church, anyone attending, or associated with the church (previous or past). Furthermore, I agree not to post any photos of minors on any social media site without a signed parental permission form submitted to the church office.

I have read the Articles of Faith and I am in agreement with the doctrinal beliefs of the International Pentecostal Holiness Church denomination.

VOLUNTEER'S SIGNATURE

Date

Hurt Pentecostal Holiness Church

1212 Grit Road * Hurt, VA 14563 * www.hurtphchurch.org * Telephone: (434) 324-8660

Purpose: This form assists our church in appointing the best possible individuals to serve within the various ministries the church offers. This form is part of a screening process, which protects the volunteers, while also serving to protect children and youth from predators, and the church from liability. This record, once turned in, becomes the property of the local church. Applicants may request that a copy of this form be forwarded to another church should they move their membership.

Procedure: Copies of this form are available from the church office. Ministry leaders are responsible for distributing blank forms to prospective volunteers, and making certain that they have completed the screening process prior to serving. The completed forms are returned to the pastor. The pastor and/or the administrative church council determines volunteer eligibility. He may appoint a committee to interview applicants, check references, and request a criminal record check. The pastor's or committee's recommendation is signed and dated. The pastor or committee gives a copy of the form to the ministry leader. The volunteer should agree to participate in any orientation or training programs conducted by the church, district, or conference (when applicable). This form shall be shared with another church entity only upon the volunteer's written request. Any such requests will be attached to the original document and kept on file.

Policy: Once submitted this form becomes a permanent record of Hurt PHC. Volunteer records should be updated every three years. In the event of accusations against the applicant, opportunity shall be given for response by the accused. Such a response will also become a part of the record and must be attached to this form.

Thank you for your interest in working with the children and youth at Hurt Pentecostal Holiness Church. We are very appreciative of your desire to volunteer and minister among us. Please be patient with us as we review this form and prayerfully consider your position of interest.

***** OFFICE USE ONLY *****

Date Received:

Recommended Not Recommended

References Checked:

Yes No

Background Check Performed:

Yes No

Signature of Pastor:

Date:

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