

GRACE EVANGELICAL LUTHERAN CHURCH

Approved Adult Form

Please fill out ENTIRE form

First Name _____ Middle Name _____

Last Name _____ Suffix (if applicable) _____

Gender _____

Maiden/Former Name (if applicable) _____

Preferred Name _____

Social Security Number (XXX-XX-XXXX) _____

Date of Birth (MM/DD/YYYY) _____

Current Address _____

City/State/Zip _____

Mailing Address same as current address
 this address:

Home# _____ - _____ - _____ Cell# _____ - _____ - _____

Work# _____ - _____ - _____ Email _____

Previous Addresses:

You must provide all previous address(es) for past 10 (ten) years. If current address has been the same for 10 (ten) or more years, list one prior address. Use back of form if necessary, or attach a separate sheet. If full address is unknown, enter as much information as possible.

Previous Address 1 _____

City/State/Zip _____

Previous Address 2 _____

City/State/Zip

Previous Address 3 _____

City/State/Zip _____

Previous Address 4 _____

City/State/Zip _____

Previous Address 5 _____

City/State/Zip _____

Previous Address 6 _____

City/State/Zip _____

Previous Address 7 _____

City/State/Zip _____

Church Activity

1. Are you a member of Grace? _____

If not, please list your current congregation: (name, city, state)

2. Do you regularly attend Grace worship? _____

Which service? _____

3. What ministries and/or Sunday school classes are you currently involved in at Grace?

4. List the name of other churches you have attended regularly during the past five years
(if applicable).

Previous Experience Working with Children or Youth

1. List any training, education, or other experiences that are relevant or have prepared you for working with children/youth.

2. List all previous work (volunteer or paid) involving children or youth, including the name of the organization.

Ministry at Grace

1. What is the area of Children/Youth work for which you would like to volunteer?

2. What special skills or abilities would you like to offer?

Personal Background

1. Do you have any physical conditions that would prevent you from performing certain types of activities relating to youth or children's work? _____ If yes, please explain.

2. Have you ever been charged with any misdemeanor or felony relating to physical contact with another person, child abuse, or actual or attempted molestation? _____
If you prefer, you may discuss your answer with a pastor rather than answering it on the form.

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize

any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children/youth work. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf.

If given a volunteer placement I agree to be bound by the bylaws and policies of Grace Evangelical Lutheran Church.

I hereby authorize Grace Evangelical Lutheran Church to conduct a PA State Police Criminal Record Check using the information on this form. I further agree that I am not disqualified from employment or service related to working with children, due to a prior conviction in any other jurisdiction. I understand that should that status change during the course of my service I am required by law to notify Grace Lutheran Church within 72 hours.

_____ Check this box if you would like us to submit a PA State Criminal Record Check for you. If you can provide us with a recent check, we do not need to process one for you.

Signature of Applicant _____ Date _____

Internal Use Only-----

Date Received: _____

Interview with Applicant Conducted? yes (date: _____) no

Notes: (references, etc.) _____

This applicant is considered an approved unapproved adult at Grace.

Date of decision: _____