



Trinity Lutheran Church Camp Hill Keeping Kids Safe Volunteer Information Form

Name _____ Email _____

Address _____ City/Zip _____

Cell Phone # _____ Home Phone# _____

Occupation _____ Employer _____

Work Phone # _____ Employer City/Town _____

Church Activity

1. Are you a member of Trinity? _____ If not, please list your current congregation _____

Do you regularly attend Trinity worship? _____ Which service? _____

What ministries and/or Sunday school classes are you currently involved in at Trinity?

2. List the name of other churches you have attended regularly during the past five years.

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.

Type of Work	Name of Organization

Ministry at Trinity

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 References (not relatives)

1. Name _____ Day Phone# _____
 Address _____ Evening Phone # _____
 _____ Relationship to you _____
2. Name _____ Day Phone# _____
 Address _____ Evening Phone # _____
 _____ Relationship to you _____

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 Trinity Evangelical Lutheran Church.

Applicant's Signature	Date
Witness	Date
