



HEBRON BAPTIST CHURCH
VOLUNTEER APPLICATION

Mail: Hebron Baptist Church
Attn: Peggy Rowe
P O Box 279
Dacula GA 30019
FAX: 770.513.4716
Email: prowe@hebronchurch.org

Department applying for: Nursery/Preschool Children Awana Student Ministry Adults
Recreation-sport Other

This Volunteer Application is used to help the church provide a safe and secure environment for those who participate in our programs and use our facilities. The information requested is needed to process your application. Please complete the form thoroughly so that we can process it quickly. Thank you!

PERSONAL INFORMATION

- 1. Name Last First Middle Name you go by Date / / 20
2. Present Address How Long at Present Address?
City State Zip County: Gwinnett Barrow Walton
Home Phone Work Phone Cell Phone
Former Address How Long at Former Address?
Former Address How Long at Former Address?
3. Do you have a personal relationship with Jesus Christ? Yes No Not sure
Baptism by Immersion date: / /
Please give some details:
4. E-mail Address(s) Date of Birth / / Age: Male Female
5. Marital Status Social Security #: (Over 18, yes, we must have this.©)
6. Driver's License # State of Issue: Expiration Date / / (Yes, need this, too!©)
7. Have you ever been known by any other name (maiden or nickname)? Yes No
8. Have you ever been convicted of or plead guilty to a crime other than a minor traffic violation or are there any charges currently pending against you? Yes No
9. Is there any reason, including those that are physical or mental health related, that might keep you from effectively working with children/youth or that may cause a child potential harm? Yes No
10. Have you ever been addicted or concerned that you were addicted to drugs, alcohol, pornography, or any other harmful addictions; or has anyone ever suggested that you may have a problem with any of the above? Yes No
11. Do you presently use illegal drugs, alcohol, or tobacco of any kind? Yes No
12. I have received and read the Hebron Church Child Protection Policies. (Required for Approval) Please initial here:
13. Please list any gifts, callings, training, education or other factors that have prepared you to volunteer in your area of choice:

## CHURCH HISTORY AND PRIOR MINISTRY WORK

Current church membership or attendance \_\_\_\_\_ Are you active?  Y  N

How long? \_\_\_\_\_ Are you a member of a Small Group or Sunday school class?  Y  N Leader's name: \_\_\_\_\_

Address (if other than Hebron) \_\_\_\_\_ City/State/Zip \_\_\_\_\_ Phone # \_\_\_\_\_ Church Website \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Ministry Area(s)? \_\_\_\_\_

**Please list other church(s)** where you have been a member, attended, served as a volunteer, or been employed in the past 10 years  
 (Use separate page if needed):

Church Name, Address & Contact person	Phone – Fax – E-Mail	Ministry Areas	Dates of Service

**Please list non-church work** involving preschool, children, youth or senior adults (*Little League, Boy Scouts, YMCA, etc.*).

Organization Name, Address & Contact person	Phone – Fax – E-Mail	Area of Service	Dates of Service

**★ PLEASE GIVE TWO (2) PERSONAL REFERENCES ~ Yes, we must have these to approve you for service. ➤Known you for 1 yr.**  
 ➤18 yrs old ➤Non-family member ➤Hebron staff members may be used only if you have specific permission prior to application.

Name	EMAIL	Complete Address	Phone
<i>We would be grateful if you would please write clearly and legibly. Thank you! ☺</i>			
			H- C-
			H- C-

### Please Read Carefully

In consideration of the receipt and evaluation of this application by **HEBRON BAPTIST CHURCH**, I agree and represent that the information contained in this form is correct to the best of my knowledge. I authorize **HEBRON BAPTIST CHURCH** and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, driver record, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications as a volunteer now and, during my tenure as a volunteer with **HEBRON BAPTIST CHURCH**.

I authorize any references, or any other person or organization, whether or not identified in this application, to give you any information (including opinions) regarding my character and fitness for volunteer service. I hereby release any individual, church, denominational agency or official, reference, or any other person or organization, including record custodians, both collectively and individually, and whether or not identified in this application, 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, excepting only the communication of knowingly false information. 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 release which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of this authorization shall be as valid as the original.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Printed Name: \_\_\_\_\_