

FRONTLINE CHURCH VOLUNTEER APPLICATION

This application is to be completed by all applicants for any volunteer position involving the supervision of minors involved in Frontline Church.
This is not an employment application.

GENERAL INFORMATION

Today's Date: _____
Full Name: _____ Preferred Name: _____
Social Security Number: _____
Drivers License Number: _____
Address: _____
City, State & Zip: _____
Home phone: _____ Cell phone: _____
Work phone: _____ E-mail: _____
Date of birth: _____ T-shirt Size: _____

Check desired ministry area(s):

Preschool Ministry

Service Times: Frontline (Downtown)

Sun. 9 a.m. 10:30 a.m. 12 p.m. 1:30 p.m. Thurs. 7 p.m.

Service Times: Frontline (Shawnee)

Sun. 10:30 a.m. 12:00 p.m.

Age Groups:

Nursery One's & Two's Three's, Four's, & Five's

Service Roles:

Teacher Lead Teacher Coordinator Greeter/Registration
Logistics

Frontline Kids (Children's Ministry)

Service Times: Frontline (Downtown)

Sun. 9 a.m. 10:30 a.m. 12 p.m. 1 p.m. Thurs. 7 p.m.

Service Times: Frontline (Shawnee)

Sun. 10:30 a.m. 12:00 p.m.

Age Groups:

K & 1st grade 2nd & 3rd grades 4th & 5th grades

Service Roles:

Teacher Lead Teacher Coordinator Greeter/Registration
Logistics

Frontline Youth (Student Ministry)

Campus: FRONTLINE SHAWNEE

Age Groups:

Middle School (6th-8th Grade) High School (9th-12th grade)

Service Roles:

Youth leader Community group host Community group leader
Worship band Bus Driver (must have CDL)

CHURCH INVOLVEMENT (please fill out entire form)

How long have you attended Frontline _____

Are you a Member of Frontline? Yes No Since when? _____

If not, Do you regularly attend our weekend services? Yes No

What Time? _____ Which Campus? _____

Do you regularly attend a community group? Yes No

Which one? _____

In what other church ministries are you presently involved? _____

Have you personally accepted Jesus Christ as your Lord and Savior, and are you committed to having the character of Jesus live through you? Yes No

Briefly share your testimony: _____

What do you think the purpose of ministry to the Next Generation is in the local church? _____

Why do you want to be a part of ministry to the Next Generation at Frontline? _____

REFERENCES

List two adults, who are not related to you, yet have a definite knowledge of your character and ability to work with minors.

1. A staff member, community group leader or ministry team leader from our church:

Name _____ Nature of Association _____

Length of time known _____ E-mail Address _____

Home phone _____ Work phone _____

2. Friend, neighbor or fellow Frontline Member:

Name _____ Nature of Association _____

Length of time known _____ E-mail Address _____

Home phone _____ Work phone _____

FAMILY INFORMATION

Marital status: Single Married Divorced Engaged

If married, spouse's name: _____

If you have children, their names and ages:

1. _____ 2. _____

3. _____ 4. _____

MINISTRY EXPERIENCE

(List most recent first)

Church _____ Dates _____ Area(s) of service _____ Phone _____

1. _____

2. _____

3. _____

EDUCATION

High school _____
City _____ State _____ Grad year _____
College/tech school _____
City _____ State _____ Grad year _____
Degree and Major _____ Minor _____
Are you CPR certified? Yes No Do you have any medical training? Please describe: _____

Briefly describe your previous experience in working with minors:

Have you ever been convicted of a felony, or a misdemeanor involving any act, use or possession of a weapon or act of dishonesty for which the record has not been sealed or expunged? **Yes No**

If Yes, please briefly describe the nature of the crime(s), the date and the place of conviction and legal disposition of the case: _____

(Frontline will not deny any volunteer opportunity solely because the person has been convicted of a crime. Frontline, however, may consider the nature, date and circumstances of the offense as well as whether the offense is relevant to the duties of the position applied for.)

Are you currently out on bail, the subject of a current warrant for arrest, or released on your own recognizance pending trial? **Yes No**

Have you, at any time, been involved in or accused, rightly or wrongly, of sexual abuse, maltreatment, or neglect? **Yes No**

Have you been arrested or convicted for any criminal act more serious than a traffic violation? **Yes No**

Have you ever been a victim of any form of child abuse? **Yes No**

Have you ever gone through treatment for alcohol or drug abuse? **Yes No**

Have you ever been asked to step away from ministry or work with students or children in any setting, paid or volunteer? **Yes No**

Is there anything in your past or current life that might be a problem if we found out about it later? **Yes No**

(If the answer to any of the above questions is yes, they will be discussed confidentially during an interview.)

FAITH AND POLICY AGREEMENT

I have read the church’s statement of faith, Worker Expectations, and ministry-specific policy handbook and agree to be bound by them.

Yes No Initial here: _____

WAIVER/RELEASE

I, the undersigned, give my authorization to Frontline Church representatives – hereafter referred to as The Church – to verify the information on this form. The Church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a church ministry worker. I am willing to request and submit to The Church background reports on myself from the Ok Department of Social Services central registry.

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 ministry. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the constitution, statement of faith, and policies of The Church, and to refrain from conduct unbecoming to Christ in the performance of my services on behalf of The Church. If I violate these guidelines, I understand that my volunteer status may be terminated. By signing this application, I state that all of the information given about myself is true.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN ACT. This is a legally binding agreement, which I have read and understand.

Print name

Signature

For office use only:

Date received: _____ Date of follow up: _____

Date of New Volunteer Training: _____

Ministry Covenant IPCM Starting role: _____ Service time: _____

Rotation: _____