



Volunteer Staff Information

Bethany Baptist Church Salem, Oregon



Name _____
First Middle Initial Last

Address _____ City _____ State _____ ZIP _____

Home Phone _____ Cell Phone _____

E-mail? _____

Marital Status - ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

Previous/Maiden Name(s) _____

Date of Birth: ____/____/____ Driver's License Number _____ State _____

Occupation _____ Employer _____ Work Phone _____

May we contact references noted to discuss your background and fitness to minister with children
☐ Yes ☐ No

Where would you like to serve?

Wherever the need is ☐ Sunday School ☐ Children's Church ☐ Nursery ☐ AWANA ☐ Crosswalk ☐
Other _____ ☐

Age Group Preferred?

Infant/Toddler ☐ Preschool ☐ K-1st ☐ 2nd– 5th ☐ Middle School ☐ High School ☐

Why do you desire to serve in the children's and youth ministries here at Bethany?

What about children's and youth ministries do you especially enjoy? _____

About how long have you been attending Bethany? _____ Are you a member? Yes ☐ No ☐

If no, please explain _____

Are you serving in other ministries here at the church? Yes ☐ No ☐ If yes, what are they?

Have you had any previous TRAINING or EDUCATION in children's ministries? Yes ☐ No ☐

Type of Training	School or Church & City
_____	_____
_____	_____

Please list previous EXPERIENCE ministering to children or youth, church or non-church.

Type of Experience/Your Role	Church or Organization & City
_____	_____
_____	_____

"Behold Children are a Gift of the Lord..." Psalm 127

Children's Ministries Safeguards of Care:

Children's ministries observe the "safe and secure" rule. All workers are serving the Lord and his children through their respective ministries, and no inappropriate words, gestures, or physical contact with children is permitted.

Corporal punishment (physical forms of discipline), harsh words, or threats are not to be used. Please consult the ministry director with specific discipline questions. Any behavior which seems abusive or inappropriate should be reported to the ministry director.

All workers or volunteers will have their names submitted to a national agency for a criminal background check. If a background check reveals a prior sexual misconduct related offense, that person will be permanently ineligible to be involved in the care, supervision and/or the teaching of minors.

No minor is to be alone with one non-related adult on the church's premises or in any sponsored activity unless in a counseling situation.

As a volunteer with children or youth, do you understand and agree to observe the safeguards of care noted on this form? Yes ☐ No ☐

Have you ever been convicted of child sexual or physical abuse? Yes ☐ No ☐

Are there any other issues in your background which would affect your ability to work with children? Yes ☐ No ☐

Thank you for taking the time to complete this application!

Applicants Signature _____ Date _____

List one reference other than family (former Pastor, etc.):

Name _____ E-mail _____ Phone _____

I am voluntarily submitting the above information under oath with the full knowledge and understanding that Oregon Revised Statute 162.075, False Swearing, provides that "1) A person commits the crime of false swearing if the person makes a false sworn statement, knowing it to be false. 2) False Swearing is a Class A misdemeanor." I understand that false information in this disclosure form constitutes a crime of False Swearing, under ORS 162.075 and may subject the applicant to criminal prosecution.