

# Sample Application Form for Working with Children and Youth

## Name of Parish or Ministry

*Instructions: Please print and complete all of the questions accurately and fully. Attach additional sheets if needed.*  
 Today's date \_\_\_\_\_

**Full Name** \_\_\_\_\_  
*First* *Middle* *Last*

Former Legal Names \_\_\_\_\_

Did you serve with (name of parish \_\_\_\_\_) in previous years?  Yes  No

Note: If you served in this parish in previous years you only need include any changes or additions with this application.

You also must include one recommendation from a non-related person and please answer the following question:

What have you been doing in the past year that has helped you grow spiritually? What have you done that will help you in your continued work with children and youth?

Phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

Date of birth \_\_\_\_\_ Male or Female (circle)

Current Address \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_ year or months

**Previous Addresses (from the past 5 years) – please use extra paper if needed**

Years	Address

**Emergency Contact** \_\_\_\_\_ Relationship \_\_\_\_\_

Phone numbers: Day \_\_\_\_\_ Night \_\_\_\_\_ Cell \_\_\_\_\_

**What position are you applying for?** \_\_\_\_\_

Can you perform the essential functions of the job for which you have applied, with or without reasonable accommodations?  Yes  No

Comments: \_\_\_\_\_

**If you are applying for a position where you will be driving others** Driver's License Number & State \_\_\_\_\_

Have you ever had a moving violation?  No  Yes

List year(s) and violation(s) \_\_\_\_\_

**If you are applying for a paid position** Social Security Number \_\_\_\_\_

You will be required to show documents verifying your employment eligibility and identity to complete the INS Form I-9 as required by the Immigration Reform and Control Act.

Are you legally eligible to work in this country?  Yes  No

**Personal Statement** Please write a personal statement and answer the following questions.

- 1) What interests you about the position for which you are currently applying?
- 2) What has prepared you for the position for which you are currently applying?

**References** from persons who know you well and are willing to supply data regarding your qualifications are an important part of your application. These persons might be teachers, employers or an adult friend, none of whom are related to you.

Name of Reference	Company	Relationship to applicant	Years known	Address (street, city, zip)	Day-time phone (with area code)

### Volunteer Experience

Dates	Organization	Director/Contact	Address	Phone	Duties

### Education History

Years	School	Major Subjects	Degree Granted

### Employment History (Provide a full record of employment and explain any gaps in employment. Use a separate sheet, if necessary.)

Dates	Employer	Address & Phone	Nature of Work	Supervisor	Reason for Leaving

To assure the safety of children and youth, the *(name of parish or ministry)* \_\_\_\_\_ reserves the right to request a background check which could include criminal records and/or motor vehicle checks on prospective Church Personnel.

Have you ever been convicted of a crime, including any drug or alcohol offense other than a minor traffic offense?

Yes  No If yes, please describe?

Under penalty of perjury, I swear or affirm that all the information on this application is true and complete, and I understand that if any false information, omissions or misrepresentations are discovered, my application may be rejected, and, if I am selected, my service may be terminated at any time.

I authorize the *(name of parish or ministry)* \_\_\_\_\_ to investigate the statements I have made in this application, and specifically authorize any parties listed in this application or reference sheet to release information they have about me to the *(name of parish or ministry)* \_\_\_\_\_.

I agree to comply with the *(name of parish or ministry)* \_\_\_\_\_ rules, regulations and policies. I agree that my selection may be evaluated and can be terminated at any time either by the *(name of parish or ministry)* \_\_\_\_\_ or me. I understand that the terms and conditions of my service may be changed at any time by the *(name of parish or ministry)* \_\_\_\_\_.

Signature \_\_\_\_\_ Date \_\_\_\_\_