

3106 E. Carmel Dr. Carmel, IN 46033 / 317-846-6882 / 317-844-0984 (Fax) / http://www.stpeterscarmel.org

## **Employee/Authorized Volunteer Application and Disclosure Form**

Name: Last		First		Middle	
Social Security Number		Driver's License Number (Required only for those who transport children/youth)			
Address: Street		City	State	Postal Code	
Daytime Phone	Evening Phone	Cell Phone			
Email Address			Date of	of Birth:	
My Previous experien am seeking to fill inclu		_	ınteer) rela	ited to the ministr	
Church/Agency Name					
		City	State	Postal Code	
Address: Street		City	State	Postal Code	
Address: Street  Contact Person  Please give names and least five years. (Only a	l phone number for topplicable for those seeking	Phone three (3) referen	ces who ha		
Address: Street  Contact Person  Please give names and least five years. (Only a long)  Contact Person	l phone number for topplicable for those seeking	Phone  three (3) reference gemployment at St.  Phone	ces who ha		
Church/Agency Name  Address: Street  Contact Person  Please give names and least five years. (Only a language)  Contact Person  Contact Person  Contact Person  Contact Person  3.	l phone number for topplicable for those seeking	Phone three (3) referen g employment at St.	ces who ha		

I have never been found guilty, or plead		
	O True	O Not True
		of the charge (please indicate the date, nature and place of ed; and the precise disposition of the charge).
physical abuse; child abuse; or financial	misconduct has	rimination, harassment, exploitation, or misconduct; s ever resulted in a judgment being entered against ause the statute of limitations has expired.  O Not True
	ort explanation o	f the lawsuit. (Please indicate the date, nature and place if filed; and the precise disposition of the lawsuit).
my employment, professional credentials	s or authorization or authorization of authorization or a	on to hold a volunteer position or had on to hold a volunteer position terminated for reasons crimination, harassment, exploitation, or misconduct;
		O Not True (Please include the date of termination; name, address, and nature of the incident(s) leading to your
Do you have a valid driver's license.  State where drivers license was issued: _		
		cense suspended or revoked within the last five years /or under the influence of a controlled substance. O Not True
entrusted with the responsibilities of the		background that would call into question your being nich you are applying?  O No
If yes, please provide a brief description		
I acknowledge that a background check	may be conduct O Yes	ted in order to approve this application.
integrity, and truthfulness for the health of the is true and complete. I understand that any m for termination, or termination of, the position amend the responses and information I have p when given, or though accurate when given, t relationships with an open exchange of releva between employees or volunteers and the chu Christ and/or agents to make inquiries regardiformer employers, supervisors, courts, law em	e church. To that disrepresentations in I am seeking to provided if I come the response of in ant information by rich they seek to st ing all statements afforcement and ot the made, and to specific that	oned volunteer positions in the church require honesty, tend, I attest that the information set forth in this application or or omission may be grounds for rejection or consideration fill. I acknowledge that it is my duty in a timely fashion to to to know that the response or information was incorrect aformation is no longer accurate. Beginning such uilds the foundation for a continuing and healthy covenant serve. To that end, I authorize St. Peter's United Church of a I have set forth above. I also authorize all entities, persons, ther public agencies to respond to inquiries concerning me, eak openly and responsibly. I hereby release them from all is made in good faith and without malice.
information regarding applicants with those p to fill. To that end, I authorize St. Peter's Un share information gathered in connection with	ersons in a positi ited Church of Cl n this application	lunteer recruitment process involves the distribution of ion to recruit, secure, and supervise the position I am seeking hrist and the agents to circulate, distribute, and otherwise to such persons for their stated purposes. I understand that ation it has gathered about me, if I request it to do so.
Signature		Date
Parent's or Guardian's Signature (for applied	cants who are un	nder 18) Date