

Date								

CONFIDENTIAL VOLUNTEER APPLICATION - for Applicants under the age of 18

In order to assure the health, safety, and security of our children and families, we screen all our volunteers. These questions are not designed to offend or to pass judgment, rather to create an environment where a person's past will not hinder the ministry in carrying out its mission in a safe, fun and productive way.

PLEASE CHECK THE MINISTRIES WHERE YOU HOPE TO SERVE.

Nursery & PreK	Children's Min K-4th (Sun)	PTM: PreTee	eTeen Min (Sun)			
VBS LiveV	Vire PreK. K-5th (Wed.) Ye	outh: MSM				
PERSONAL & SPIRITUA						
Please PRINT clearly and c You and a Parent are requ	omplete the entire application. Fired to sign this form.	Please fill out this f	orm with a Parent	•		
Legal Name:						
Last	First		Middle			
Current Address:		City/Zip				
Phone #	Date of Birth	1				
E-Mail Address						
Parent Name		Phone #				
	d services at Western Springs Baptist			[] No		
·	Church you do attend.					
Are you a Christian, someone	who loves Jesus and follows Him an	d His teaching?	[] Yes	[] No		
If Yes, explain briefly	when and how you became a Christ	ian				

HAV	E YOU EVER		
*	Used illegal drugs and substances, or use addictive substances like tobacco, alcohol, pornography, etc.?	[] Yes	[] No
*	Been convicted of or pleaded no contest to any crime?	[] Yes	[] No
\$	Engaged in or been accused of any act of child molestation, exploitation, or abuse?	[] Yes	[] No
	must answer "Yes" to any of the above questions, please explain using the ba his may impact you serving with children and youth at Western Springs Baptis		discuss
\$	Would you like one of our Pastors to contact you to discuss your answers regarding the above questions?	[] Yes	[] No
AUT	HORIZATION		
The ir	nformation contained in this application is true and complete to the best of my	knowledge.	
APPL	CANT'S SIGNATURE	Date	
PARE	NT'S SIGNATURE	Date	

PLEASE RETURN THIS COMPLETED APPLICATION TO THE OFFICE OF WSBC.