



Date: _____ Volunteer Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Email Address: _____

Phone Number(s): _____

Please indicate the ministry area(s) you are planning to work with:

Congregation: _____

- Early Childhood _____
- Elementary _____
- Students _____
- One-2-One _____
- Other _____

In order to protect our children and staff from potential problems, we review and screen all applicants. Please take a moment to fill out the following information for our records:

1. How long have you attended Fellowship Bible Church of Northwest Arkansas? _____
2. Please provide the name, phone number and/or email address for **one non-related character reference** from Fellowship Bible Church of Northwest Arkansas. This should be a staff member or someone who attends regularly.

3. Please provide the name, phone number, and/or email address of **one institutional reference** that is not related to you. This should be an adult that you have worked with in a church, ministry, or other organized activity. This person should have knowledge of your interactions with children or youth. If you do not have this type of reference, please provide an additional character reference.

4. Have you ever worked or volunteered at a different church or ministry or other work involving either children or youth? Yes No
If yes, name of church/organization _____
City and State _____ Responsibilities _____
5. Have you ever been charged or convicted in civil or criminal court of any offense relating to abuse or molestation? Yes No
6. Within the last ten years, have you been charged or convicted of a felony? Yes No