



**Victory Outreach East Las Vegas Kidz G.A.N.G.
Volunteer Ministry Application**

This survey is to be completed by all those desiring a ministry position involving the supervision or custody of minors. It is being used to help the church provide a safe and secure environment for those who participate in our programs and facilities. We recognize that this form is extensive, but ask for your help completing the form in its entirety. Your responses will be maintained confidential although there may be circumstances where such information may be provided on a "need to know" basis to individuals working with our ministry and to other individuals in order to evaluate your application and/or comply with applicable legal requirements.

Date: _____

PERSONAL DATA (Please print)

Last Name: _____ First: _____ Middle: _____

Date of Birth: _____ Driver's License Number: _____

Home Phone: _____ Address: _____ City: _____ Zip: _____

Marital Status: _____ Spouse's Name: _____ # of Children: ____ Ages: _____

Present Employer: _____ Work Phone: _____ May we contact you at work: _____

Emergency Contact Name: _____ Number: _____

Do you have a personal relationship with Jesus Christ? _____ How long have you attended VOE? _____

Do you regularly attend services? _____ Do you tithe on a regular basis to VOE? _____

What are the ministries you are currently involved in at VOE? _____

List any gifts, training, education, or other factors that have prepared you for you work in this ministry specifically with children: _____

Why do you desire to work with children? _____

What position do you desire (teacher, assistant, overseer, etc...)? _____ Age level you prefer: _____

LEGAL QUESTIONNAIRE

The questions listed below are to help provide a safe and secure environment for our children. All information is held strictly confidential. Answering yes to any of the questions may not necessarily exclude you from involvement in the children's ministry. Thank you for your understanding.



1. Have you ever been charged with, arrested, or convicted of a sexual offense or a crime of violence relating to children? **Yes** **No**
2. Have you ever been reported to a social services agency, law enforcement authority, child abuse registry, or similar organization regarding abuse or misconduct involving children? **Yes** **No**
3. Is there any issue involving the use of alcoholic beverages, illegal drugs, or the abuse of legally prescribed drugs that could interfere with your capability to work with children? **Yes** **No**
4. Have you been hospitalized or treated for alcohol/substance abuse within the last 3 years? **Yes** **No**
5. Are there any circumstances involving your lifestyle, your background, your mental health, or your emotional well-being that would interfere with your capability to work with children? **Yes** **No**

If you have answered "Yes" to any of the above questions please provide the date and complete description of the circumstances involved.

APPLICANT STATEMENT

The information contained in this application is correct to the best of my knowledge. I understand that any omission of material fact on the application may be grounds for rejection of this application.

Victory Outreach East Las Vegas Teacher's Covenant

Having committed to the ministry of teaching and the habits essential for spiritual maturity I commit to...

- ❖ Prepare for ministry by maintaining my personal relationship with Christ.
- ❖ Support the teaching ministry by praying for the church and Kidz G.A.N.G. staff, the other teachers, and specifically students in my class.
- ❖ Cooperate with other ministries and place the greater good of the whole body over the needs of my ministry.

Should my application be accepted I agree to follow the Policies of Victory Outreach East Las Vegas and to refrain from unscriptural conduct in the performance of my service on behalf of the church.

I understand that the personal information will be held confidential by the Pastor and overseer of Children's Ministries.

Applicant's Signature:

Date: _____

For Office Use Only

Application Approved? _____

Date: _____

Position: _____

Age Group: _____