

**Oakwood Church**  
**Children/Youth Worker Application**

CONFIDENTIAL

The information contained in this application will be disclosed only to those who have a genuine need to know in order to carry out their responsibilities at Oakwood Church or as required by law.

**Personal**

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Phone \_\_\_\_\_ Email: \_\_\_\_\_

Best Time to Call \_\_\_\_\_ Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening

Occupation \_\_\_\_\_

Marital Status \_\_\_ Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Widowed \_\_\_ Separated

If married, spouse's name \_\_\_\_\_

Children's names & ages \_\_\_\_\_

How long have you attended Oakwood? \_\_\_\_\_ Are you a member of Oakwood? \_\_\_\_\_

Briefly describe how you came to faith in Christ. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Personal History**

**In order to assure the health, safety and security of our children and students, we screen our volunteers.** If any of the following situations apply to you, please check below so we may discuss how this may impact your serving in Children's/Youth Ministries.

**Physical:** Do you have any health problems (disabilities, physical limitations, etc.) that might affect your work with children? **Y / N** Have you ever tested positive for HIV? **Y / N**

**Emotional:** Do you have a history of emotional or mental illness that might currently place children, other workers or yourself at risk? **Y / N**

**Social:** Do you have an arrest record or conviction for physical abuse, sexual abuse, neglect, molestation, or exploitation of a minor, crimes of violence, sex crimes, or serious traffic law violations? **Y / N**

Recognizing that abuse is a traumatic event in a person's life and realizing that by God's grace a victim can find healing, if you are a victim of a abuse who has not worked through your pain, the pastoral staff is here to assist you. Please feel free to call.

If you have answered "yes" to any of the above questions, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Ministry Experience**

Please describe previous and current ministry experience at Oakwood, including the name of the person to whom you reported.

\_\_\_\_\_  
\_\_\_\_\_

Please describe your ministry experience at the last two churches attended if applicable.

Church \_\_\_\_\_ Attended From \_\_\_\_\_ to \_\_\_\_\_ Ministry  
Experience \_\_\_\_\_ Person to whom you reported \_\_\_\_\_  
Church Telephone Number: \_\_\_\_\_

Church \_\_\_\_\_ Attended From \_\_\_\_\_ to \_\_\_\_\_ Ministry  
Experience \_\_\_\_\_ Person to whom you reported \_\_\_\_\_ Church  
Telephone Number \_\_\_\_\_

List any skills or special interests \_\_\_\_\_

\_\_\_\_\_

List any training or education that has prepared you to work with children and/or youth

\_\_\_\_\_  
\_\_\_\_\_

**Personal References** (Not employment-related or relative)

Name \_\_\_\_\_ Nature of Association \_\_\_\_\_  
Home Phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_

Name \_\_\_\_\_ Nature of Association \_\_\_\_\_  
Home Phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_

**Authenticity and Authorization**

I authorize Oakwood Church or its representatives to make any and all appropriate inquiries regarding my background, such as any criminal record check or traffic record check, and I release the church and its representatives from any liability which may result from such actions. The information included in this profile is correct to the best of my knowledge. **The following information is required in order for us to do a background check.**

Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Driver's License # \_\_\_\_\_

Social Security # \_\_\_\_\_

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