

# Application for Service in Family Ministries

## Moraga Valley Presbyterian Church

Revised 03.2015

This application is to be completed by all applicants involving the supervision or custody of minors. It is used to help the church provide a safe and enriching environment for all children/students who participate in our programs and use our facilities. Thank you for taking the time to share your story with us. **The following information will be kept confidential.**

### General Information

Name \_\_\_\_\_  
(Last) (First)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Place of employment: \_\_\_\_\_ Occupation: \_\_\_\_\_

### Spiritual Background

Briefly describe when and how you became a Christian: \_\_\_\_\_

How do you maintain your relationship with Christ? \_\_\_\_\_

Are you a member of MVPC?  Yes  No

If no, do you plan to become one?  Yes  No If no, please explain: \_\_\_\_\_

What hour do you most often attend a worship service? \_\_\_\_\_

List other churches (names, addresses) you have attended regularly in the past 5 years. \_\_\_\_\_

### Ministry

In what area of ministry are you interested in serving: **Nursery** **Promiseland**  
**SonTown** **Kingdom Kids** **Quest** **Senior High** **Special Needs**  
**Special Events** **Vacation Bible School**

List all previous positions where you have worked with children/students. \_\_\_\_\_

List any gifts, training, education or other factors that have prepared you to work with children/students in this area of ministry. \_\_\_\_\_

## **Lifestyle and Legal Concerns**

In caring for minors, we believe it is our responsibility to seek leaders who are able to provide healthy, safe and nurturing relationships. In light of this, please answer the following questions. Any special concerns can be discussed individually with a staff member of Family Ministries.

Do you have any physical conditions that would prevent you from performing certain types of activities relating to working with children/students? Yes\_\_\_ No\_\_\_ If yes, please explain:

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Are you using illegal drugs? Yes No

Have you ever gone through treatment for alcohol or drug abuse? Yes No

Have you ever been arrested and/or convicted of a crime? Yes No

If yes, please explain:

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Have you ever been accused of or convicted of any form of child abuse? Yes No

If yes, please explain:

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## **Permission to do Criminal Background Check**

I, \_\_\_\_\_, give  
Moraga Valley Presbyterian Church permission to do a Criminal Background Check.

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

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

Date of Birth \_\_\_\_\_

### **References** (not former employers or relatives)

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

The information in this application is correct to the best of my knowledge. I authorize any references listed in this application to give you any information they may have regarding my character and fitness for working with children/students. I release all such references from liability for any damage that may result from furnishing such evaluations to you and I waive any right that I may have to inspect references provided on my behalf.

I understand that this personal information will be held confidential by the professional church staff.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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