

# CHRIST CENTER

## APPLICATION FOR CHILDREN & YOUTH WORK

This Application is to be completed by all applicants for any position (Volunteer or compensated) involving any access to children (minors under 18 years of age) or developmentally disabled persons. It is being used to help this organization provide a safe and secure environment for those children, youth and developmentally disabled persons who participate in our programs and use our facilities.

### PERSONAL

Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle (Maiden)

Social Security Number: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Present Address: \_\_\_\_\_

Number of years at present address: \_\_\_\_\_

List prior addresses for the past five years: (use extra blank paper if necessary)

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

How long so employed? \_\_\_\_\_ If accepted or hired, are you authorized to work in the U.S. on an unrestricted basis? \_\_\_\_\_  Yes  No Explain: \_\_\_\_\_

Marital Status  Married  Single  Engaged  Separated  Divorced  
 Remarried  Widowed

Do you use any prescription drug on a regular basis?  Yes  No If so, please state the name and reason for its use: \_\_\_\_\_

Please list any medical conditions we should be aware of: \_\_\_\_\_

Do you have any physical or medical condition that would limit your ability to do this job? (For example: If working with someone disabled, will you be able to lift them? If teaching/supervising children, will you be able to run short distances in an emergency?)

Yes  No

If no, please explain: \_\_\_\_\_

If no, what can be done to accommodate your limitation? \_\_\_\_\_

Is your life free from all habits unbecoming to a Christ-follower such as smoking, drinking and violence?  Yes  No

If no, please explain: \_\_\_\_\_

Have you ever been convicted of a criminal offense?  Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever had your driver's license suspended or revoked for any reason?  Yes  No

If yes, please explain: \_\_\_\_\_



# **CERTIFICATION, AGREEMENT, AND CONSENT TO RELEASE OF INFORMATION**

I certify that the information contained in this Application is correct to the best of my knowledge. I understand that giving any false statements may result in my dismissal. I authorize the representative of Christ Center to make an investigation of any of the facts set forth in this Application. I consent and authorize the representative of the Christ Center to check any reference or churches listed herein to give and communicate any information that they may have regarding my character and fitness for children's work, and I release same from liability for any damage that may result from furnishing such facts, evaluations, or information to you.

I am aware that a "Criminal History Check" may be requested on me from the Washington State Patrol pursuant to Chapter 43.43 of the Revised Code of Washington. I understand that this statutory provision restricts use of the information received by the recipient to the initial employment or engagement decision and that further dissemination or use is prohibited.

I further understand that this statutory provision was intended to protect the confidentiality of such information. Despite the foregoing, I am knowingly and voluntarily waiving my rights to keep this information confidential and specifically consent to and authorize the release of such information by Christ Center or their designated representative to inquiring churches, law enforcement agencies, or other children's groups for whatever purpose.

I further consent to and authorize the release of any information contained in this Application or subsequently acquired from whatever source to any other church, law enforcement agency, including, but not limited to, information received from the Washington State Patrol "Criminal History Check," or children's group for whatever purpose.

If my Application is accepted, I agree to be bound by the Constitution and Bylaws of the Christ Center and its policies, and to refrain from any unscriptural conduct in the performance of my services on behalf of the Christ Center.

I understand that my engagement/employment with the Christ Center is "at will," which means that either Christ Center or I can terminate my engagement/employment at any time, with or without notice, and for any reason. All engagement/employment is continued on that basis.

I (check one of the following two options):

- waive
- do not waive

any right that I may have to inspect any information provided about me by any person or organization described above. **I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS, AND AGREE TO THEM.**

Applicant's Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_ before me, the undersigned, a Notary Public in and for the State of \_\_\_\_\_, duly-commissioned and sworn, personally appeared \_\_\_\_\_, known to me to be the individual who executed the instrument herein and acknowledged it to be his/her free and voluntary act and deed for the uses and purposes therein mentioned.

WITNESS my hand and official seal the day and year first above-written.

\_\_\_\_\_, Notary Public in and for the  
State of \_\_\_\_\_, residing at \_\_\_\_\_.  
My commission expires: \_\_\_\_\_.