

Children's Ministry Application

Applications can be turned in at the Church Office (1101 Marion St, Kingsburg)
or given to Aaron Logan. If you have any questions, please contact Aaron at (661) 330-2281 or
aaron@graceofthevalley.org.

First Name _____ Last Name _____

Date of Birth _____ Phone Number _____

Street Address _____ Email _____

City, State, Zip _____

Are you a member of GCV? Yes No

Have you completely read the GCV Children's Ministry Manual and do you agree to follow it? Yes No

If you are under 18, parents' names _____

Phone _____ Email _____

Have you worked in any other children's ministry before? Yes No

Church _____

Length of time _____

Have you ever been accused or convicted of a crime against a minor? Yes No

If yes, please explain: _____

Do you give GCV permission to run a criminal background check on you? Yes No

If yes, please complete authorization on final page.

Are you currently serving in any other ministry at GCV? Yes No

If so, which? _____

Please briefly explain why you want to serve in children's ministry.

Please describe any particular abilities, training, or experience you have that might be useful in children's ministry.

Please provide names, phone numbers, and email addresses of two non-family references.

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Please sign below if you agree that you want to be involved in children's ministry and have completed this application truthfully:

Signature

Printed Name

Date

Thank you so much for your interest in serving Christ and his church through children's ministry, including being willing to fill out this application. You can expect to hear back promptly from the leadership of children's ministry. We value your time and are excited to have you considering service to our precious kiddos!

Authorization

Authorization: By signing below, you authorize: (a) backgroundchecks.com (“BGC”) to request information about you from any public or private information source; (b) anyone to provide information about you to BGC; (c) BGC to provide us (Grace Church of the Valley) one or more reports based on that information; and (d) us to share those reports with others for legitimate business purposes related to your employment. BGC may investigate your education, work history, professional licenses and credentials, references, address history, social security number validity, right to work, criminal record, lawsuits, driving record, credit history, and any other information with public or private information sources. You acknowledge that a fax, image, or copy of this authorization is as valid as the original. You make this authorization to be valid for as long as you are an applicant or employee with us.

Personal Information: Please print the information requested below to identify yourself for BGC.

Printed name:

First Middle (none) Last

Other names used:

Current and former addresses:

| | | current | | | |
|------------|-------|----------|-------|--------|-------------------|
| from Mo/Yr | _____ | to Mo/Yr | _____ | Street | City, State & Zip |
| from Mo/Yr | _____ | to Mo/Yr | _____ | Street | City, State & Zip |
| from Mo/Yr | _____ | to Mo/Yr | _____ | Street | City, State & Zip |

Some government agencies and other information sources require the following information when checking for records. BGC will not use it for any other purposes.

Date of birth

Social security number

Driver’s license number & state

Name as it appears on license

Email address

Signature

Date

Report Copy: If you are applying for a job or to live in California, Minnesota, or Oklahoma, you may request a copy of the report by checking this box: