### LHM Information and Commitments 2022-2023

#### **Directions**

- Read and sign the Statement of Faith, complete the Enrollment Info and Activity Permit form, fill out the Legal Questionnaire and Authorization for Background Check & Investigation and complete the Volunteer Application for Children and Student Ministry.
  - Send these forms along with a check (\$75 for non Linworth Road Church Members and \$50 for Linworth Road Church Members.) Please make checks out to Linworth Road Church.
- Ask 3 people (no relatives, please) to submit the Volunteer Reference Form (located below) and supply your friends with the form and a SASE to mail their reference form to the church. Please note only sealed references mailed in or dropped off by the referral will be accepted. Once all forms are received, payment is cleared and the background check is accepted, you'll be an LHM member! Note that background checks will be repeated every 3 years.

Someone from the LHM board will call you to notify you when you're an official LHM member.

After that, you will sign up for access to the LHM members only portion of the website.

Finally, you'll participate in an online Safety Training course. A course link will be e-mailed to you.

#### **Parental Commitment**

- 1. Serve as a Teacher during LHM days.
- 2. Assist in the coordination of LHM Events or Activities.

#### **Instructions for the Volunteer Reference Forms**

You are responsible for sending the Volunteer Reference forms to three (3) unrelated (non-family member) individuals. We request that you ask your referrals to do their best to submit the reference form within 10 days of receiving it. If you would like, there is a separate file on the website that will allow you to email the Volunteer Reference forms to your chosen references, but the reference forms MUST be physically mailed/returned to the church by the reference person in a sealed envelope. E-mailed, completed Volunteer Reference forms will not be accepted.

Please be aware that your child will not be permitted to attend groups until the required Volunteer Reference forms have been received. Once received, the background check has been approved, and we've received your paperwork and fee, you and your child(ren) may attend LHM, as long as spots are available. (Should our groups be full, the check for your fee will be voided.) You will be notified in June regarding the result of your family's enrollment request.

Please give the referrals the following address in which to mail the completed reference forms:

Linworth Homeschool Ministry c/o Linworth Road Church 5400 Linworth Road Columbus, OH 43235

## LHM Statement of Faith 2022-2023

#### THE BIBLE

We believe in the Bible as the essential and ultimate basis of our beliefs. It was uniquely, verbally, and fully inspired by the Holy Spirit, was written without error in the original manuscripts and God has substantially preserved its truths throughout history.

#### GOD

We believe in one God, infinite in power, wisdom, justice, goodness and love, the Creator of the universe, existing eternally in three persons — Father, Son, and Holy Spirit.

We believe in the deity of Jesus Christ, that He was fully God and fully man, and after having lived a sinless life, voluntarily suffered and died to pay for the penalty of our sins, thus satisfying God's justice and enabling all those who trust in Him to experience complete forgiveness before God. Jesus Christ rose from the dead, ascended into heaven, and is at the right hand of God the Father. At a future unknown date, He will return to earth personally, visibly, and bodily.

#### THE HOLY SPIRIT

We believe the Holy Spirit has come into the world to reveal and glorify Christ, to convict men and women of their sins, and to impart new life to all who place their faith in Christ. He indwells believers from the moment of spiritual birth, seals them until the day of redemption, gifts and empowers them to live a life pleasing to God.

#### **HUMANITY**

We believe that man and woman, created in the image of God were innocent before God, but they chose to defy God, and thus sin separated them from their Creator, incurring divine condemnation. This alienation has corrupted human nature making mankind totally incapable of pleasing God in and of themselves. We believe marriage is designed by God and is a life-long, covenantal relationship between one man and one woman, and is intended to give a picture of Christ's loving relationship with his bride, the Church.

#### **SALVATION**

We believe that by God's grace through faith in the person and work of Jesus Christ, a right relationship with Him is eternally secured, and cannot be achieved through any human endeavor. Believers should be baptized not as a requirement of salvation, but rather in recognition of their newfound relationship.

#### THE CHURCH

We believe that the church is composed of all true believers and that its members should gather together in local churches to celebrate God's presence, learn from God's Word, commemorate the Lord's Supper, and seek to express their faith in meaningful ways.

#### **HEAVEN**

We believe in life beyond death and the bodily resurrection of every person: for those who have received Christ, eternal conscious e ring r

e not believed, conscious existence in isolatior ce realized through Jesus Christ.	n from God, subject to eternal suffe
and the parental commitments.	
Parent Signature	Date
	and the parental commitments.

## **LHM Enrollment Info and Activity Permit 2022-2023**

Envi Emoninent into and Activity Fermit 2022-2023									
Parents' Names:									
Date registered:					Email:				
Home Phone:			Mom's	Cell:		Dad's Cell :			
Address:									
Regis	stration Da	ates:				Fees:			
<ul> <li>Linworth Road Church Members: \$50/family</li> <li>Linworth Road Church Members: \$75/family</li> <li>Non Linworth Road Church Members: \$75/family</li> <li>Board Members: Waived</li> <li>All fees are non-refundable at any time.</li> <li>Please make checks out to: Linworth Road Church</li> <li>What should your child's/children's teachers know for them to be most successful at LHM (learning disabilities, suspect or diagnosed; behavioral concerns, etc.)? This is for informational purposes and will not affect your family's enrollment. Please use the back of this page if more space is needed.</li> </ul>									
be available.									
Child's Name (Please list all children on the premises.)	DOB	Age	Sex	Grade	Immunizations Current?	Medical Conditions or Allergies?	Preferred Group and Classmates (if known)		
Dodietuisien neues end n	h	a la a							

Pediatrician name and phone number:	
Dentist name and phone number:	
Emergency contact name(s) and phone number(s):	

This release form is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence. I authorize treatment under the direction of any licensed physician of the listed minor(s) in the
event of a medical emergency which, in the opinion of the attending physician, may endanger his or her life, cause disfigurement, physical impairment, or undue discomfort if delayed. The authority is granted only after a reasonable attempt has been made to reach
me by phone at the number(s) listed. The undersigned assumes responsibility for any costs connected with such treatment and hereby releases Linworth Road Church and Linworth Homeschool Ministry from any liability.

Parent Name (please print)

Parent Signature



# Legal Questionnaire and Authorization for Background Check & Investigation

Name	f parent serving at LHM:
backgrou	ing pages include the Volunteer Application and Volunteer Reference Forms. <i>Please note that the following application, including the d check and references, is confidential</i> . Linworth Road Church requires this form to be completed prior to starting staff service or service with children, and then repeated every three years. Thank you for helping us be thorough in protecting the children and teens
date(s) d	y describe any YES answers listed below on a separate page or pages. Please include your name at the top of the separate page and the occurrence and any of the following, if applicable: nature of the offense/allegation, agency that investigated the incident or made nildren services or law enforcement), church/employer involved, disposition of charges, and contact information of someone familiar vistance.
Part 1	Legal/Moral Questionnaire:
Please N	te: All YES answers below require a full explanation. A YES answer may not automatically disqualify you from service.
1.	Have you ever been convicted, pled guilty, or pled "no contest" to a criminal offense (felony or misdemeanor), except for minor traffic violations?
	□ YES □ NO
2.	Have you ever been arrested for or charged with a sexual offense, offense relating to children, or crime of violence (not covered in question 1 above), even if the charge was later dismissed?  YES □ NO
3.	Have you ever been reported to a social services agency, law enforcement, or similar organization regarding abuse or misconduct nvolving children?  YES □ NO
4.	Have you ever been subjected to expulsion, reprimand, or other discipline by a church, denomination, or other religious organization?
5.	Have you ever been the subject of a civil lawsuit involving sexual misconduct, sexual harassment, or other immoral behavior involving adults or children?  YES   NO
6.	Have you ever been the subject of a complaint or disciplinary proceeding against a professional license or other license held by you, ncluding but not limited to a license to provide child care or similar services?  YES   NO
7.	Have you ever been the subject of any disciplinary action, transfer, or dismissal, or been named as a defendant in a civil or criminal awsuit, as a result of an accident or mishap involving children?  YES   NO
8.	Have you ever been subject to any disciplinary action (including discharge) or investigation by a church, religious or other organization, by an employer?  YES   NO
9.	Have you ever sought professional help for problems related to alcohol, substance abuse, gambling, anger management, bipolar disorce sexual behavior (including pornography)?  YES  NO

wame	or parent serving at	LNIVI:	
Part 2	2: Authorization fo	or Background Investigatio	n and Criminal Records Check
1.	as to my character, work ha	abits, performance and experience, along	an investigative report will be requested that will include information with reasons for disciplinary action or termination of past with the position described, you may be requesting information from education, and previous employment.
2.	I acknowledge that a telepi most federal, state, and co		of this release shall be valid as the original. This release is valid for
3.	·		, court, institution, information service bureau, school, employer, or urnish any and all information requested.
4.			f their officers, directors, employees and agents harmless from and ion of my background in connection with my application to become
Signatur	e:		Date:
The follo	owing information is required ential and will not be used fo		entities for positive identification purposes when checking records. It
Please p	rint any other names or alias	es you have used (including maiden name	):
Home a	ddress:		
City, Sta	te, ZIP:		
Date of	Birth:	Social Security Number:	
Driver's	license number:	Issuing state:	
	Office Use Only	Statuc	Initials
1	Date Completed: This is a:  \( \text{New Application} \) This request is for:  \( \text{Staff} \)		Initials: Line

## Volunteer Application for Children & Student Ministry

The following form is required from our host church, Linworth Road Church. Some of the questions are more geared toward their church's ministry, but LHM and LRC understand that you are applying for a Parent Helper role within LHM and that some of the below questions may better suit LRC's needs.

Thank you for your interest in volunteering with the children and teens of Linworth Road Church! Please complete the following application so we can determine whether or not you and your gifting will be a good fit for working with children. Please turn in the application to the Student Ministry Director or Children's Director.

### **Personal Information:**

name:	Male or Female
Address:	
Home Phone:	Cell Phone:
E-mail:	
Marital Status:	
Spouse's Name:	Spouse's Cell Phone:
Emergency Information:	
In case of emergency, whom shall we contact for you?	
Name:	Relationship
Home Phone:	Cell Phone:
Do you have any medical conditions or allergies, including any condition certain activities involved in ministering to children (such as lifting tod physical activities, etc.).	
$\square$ No $\square$ Yes. Please describe below:	
Volunteer Position:  How are you hoping to serve in the children/student ministries at Linw	vorth?

## **Ministry Background:**

Children:

1. Briefly state how you came to know Christ:

2.	What church do you attend?
3.	Are you a member of your church? YES NO
4.	Do you serve in any other ministries? If so, please list them:
5.	Are you a member of a Life Group/Discipleship Group? YES NO
6.	Why are you interested in serving in the children/student ministry?
7.	Have you done children/student ministry at any other churches? If so, list the churches and when you served:
8.	Have you taken any courses or received any training that would equip you for children/student ministry or othe Christian service?
9.	Do you have vocational or professional experience working with children? If so, please tell us about it.
10.	Based on feedback, experience, or assessment, please list what you believe are your Spiritual Gifts:

## Personal Background:

PE	erso	onai Background:
	1.	Explain a time of spiritual stumbling in your life.
	2.	What do you do on a consistent basis to keep yourself spiritually healthy, fresh, and authentic?
	3.	How would your best friend describe you?
	4.	Please describe a reservation you have about working with children/teens. In other words, how will working with children/teens will challenge you, or take you outside your comfort zone?
	5.	Describe your confidence in the general knowledge of the scriptures and applying them to daily life.
A٤	gre	ement
lear spo are den Afte Min	n abo ken i comp y or t er pra nistry.	chankful for you and your desire to minister to our children and teens. Our goal is to provide a loving, caring environment for our children to out Jesus, the Bible, and Christian Values. We desire that each child comes into a saving knowledge of Jesus Christ, and in hearing the truth in love, will grow up into all aspects of Him. (Ephesians 4:15) I affirm that the responses I have provided in completing this application form plete, truthful, and accurate. I understand that if any information given in this application is knowingly false, Linworth Road Church may terminate my volunteer service.  Experful consideration, I desire to be a volunteer with the children's or student ministry of Linworth Road Church or Linworth Homeschool. I understand that this position is strictly voluntary and I will receive no compensation or benefits from the church or LHM. I understand position is "at will" and may be terminated at any time, with or without cause, by myself or the church. If at any time I or the church find
that	t serv	rosition is at will and may be terminated at any time, with or without cause, by myself or the church. If at any time for the church find ving in the student ministry is not appropriate or suitable for my behavior, attitude or lifestyle, I will seek with them a different opportunity ce at the church that is better suited to me.
Sign	natur	e of Applicant: Date:
Sign	natur	e of Parent (if applicant is under 18):
Prin	ited I	Name:
I		Office Use Only:
	Ap	plication reviewed by: Date:
	Int	erview completed by: Date:



## **Volunteer Reference Form 1**

Applicant's Name:	Date:					
This applicant is applying to volunteer with the children's ar him/her better and safeguard our children, please complete please insert it into the envelope supplied by the applicant, Columbus, OH 43235. We may call you for clarification, if n	e this reference seal the enve	ce form as o clope, and m	bjectively as nail it to the	possible. V	Vhen you ar	e finished,
Your Name:		Pho	ne:			
E-Mail Address:			tionship to A			
How well do you know the applicant? Very Well	 Wel		omewhat W			
How long have you known the applicant?					,	
Character	Excellen t	Above Average	Average	Below Average	Poor	Not Known
Expresses thoughts with clarity						
Develops and maintains friendships						
Team player						
Learns from others						
Overall social maturity						
Strength of self-image						
Awareness of strengths & weaknesses						
Emotional stability						
Overall emotional maturity						
Consistent spiritual walk						
Proven ministry ability						
Devotional life						
Overall spiritual maturity						
Common sense and judgment						
Self-discipline Self-discipline						
Dependability						
Initiative						
Overall personal maturity						
Suitability for work with children	Excellen t	Above Average	Average	Below Average	Poor	Not Known
Interest in interacting with children						
Success at interacting with children						
Ability to talk conversationally with children						
Tendency to not be upset by a child's misbehavior						
Training or education for working with children						
Skillfulness that you have observed when applicant is						
working with children						
Your willingness to leave your own child with applicant						
Your level of comfort with applicant teaching children						
Your level of comfort with applicant correcting children						
Your level of comfort if the applicant were to serve with						
you personally in a children's group	İ	1			1	

Applicant's Name:	Date:
Your Name:	
Please summarize the applicant's strengths and abilities.	
2. Please summarize the applicant's weaknesses and areas of need.	
3. How does this person respond under difficult and stressful circumstances?	
4. Are there any reasons that cause you to lack confidence in this applicant? If so, pleas	se explain:
5. Are there any "red flags" or reasons why you would be uncomfortable with this person any child maltreatment allegations – true or untrue – that have been made against the anecessary):	
6. Overall, what recommendation would you give for this applicant?	
I would <u>not recommend</u> this person for work with children/teens.	
I would <u>be apprehensive about recommending</u> this person for work wi	ith children/teens.
I believe without reservation that <u>this person is well qualified</u> for work	c with children/teens
7. Please give any additional comments you feel would be helpful in assessing this appli	icant



## **Volunteer Reference Form 2**

Applicant's Name:			Date: _				
This applicant is applying to volunteer with the children's and/or student ministry of Linworth Road Church. So, we can get to know him/her better and safeguard our children, please complete this reference form as objectively as possible. When you are finished, please insert it into the envelope supplied by the applicant, <u>seal the envelope</u> , and mail it to the church (5400 Linworth Road, Columbus, OH 43235. We may call you for clarification, if needed. Thank you for your time!							
Your Name:		Phor	ne:				
E Mail Address:		Polo		Applicant:			
How well do you know the applicant? Very Well	Wel	l S	-	/ell		/ell	
How long have you known the applicant?		<del></del>			•		
Character	Excellen	Above	Average	Below	Poor	Not	
Character	t	Average	Average	Average	1 001	Known	
Expresses thoughts with clarity							
Develops and maintains friendships							
Team player							
Learns from others							
Overall social maturity							
Strength of self-image							
Awareness of strengths & weaknesses							
Emotional stability							
Overall emotional maturity							
Consistent spiritual walk							
Proven ministry ability							
Devotional life							
Overall spiritual maturity							
Common sense and judgment							
Self-discipline							
Dependability							
Initiative							
Overall personal maturity							
Suitability for work with children	Excellen t	Above Average	Average	Below Average	Poor	Not Known	
Interest in interacting with children							
Success at interacting with children							
Ability to talk conversationally with children							
Tendency to not be upset by a child's misbehavior							
Training or education for working with children							
Skillfulness that you have observed when applicant is							
working with children							
Your willingness to leave your own child with applicant							
Your level of comfort with applicant teaching children							
Your level of comfort with applicant correcting children							
Your level of comfort if the applicant were to serve with							
you personally in a children's group	1	Ī	Ī	1		I I	

Applicant's Name:	Date:
Your Name:	
1. Please summarize the applicant's strengths and abilities.	
2. Please summarize the applicant's weaknesses and areas of need.	
3. How does this person respond under difficult and stressful circumstances?	
4. Are there any reasons that cause you to lack confidence in this applicant? If so, pleas	se explain:
5. Are there any "red flags" or reasons why you would be uncomfortable with this perso any child maltreatment allegations – true or untrue – that have been made against the a necessary):	
6. Overall, what recommendation would you give for this applicant?	
I would <u>not recommend</u> this person for work with children/teens.	
I would <u>be apprehensive about recommending</u> this person for work wi	
I believe without reservation that <u>this person is well qualified</u> for work	k with children/teens
7. Please give any additional comments you feel would be helpful in assessing this appli	icant



## **Volunteer Reference Form 3**

Applicant's Name:	Date:						
This applicant is applying to volunteer with the children's and/or student ministry of Linworth Road Church. So, we can get to know him/her better and safeguard our children, please complete this reference form as objectively as possible. When you are finished, please insert it into the envelope supplied by the applicant, <u>seal the envelope</u> , and mail it to the church (5400 Linworth Road, Columbus, OH 43235. We may call you for clarification, if needed. Thank you for your time!							
Your Name:		Phor	ne:				
E AA II A III							
How well do you know the applicant? Very Well	Well Somewhat Well Not Very Well						
How long have you known the applicant?							
	_						
Character	Excellen t	Above Average	Average	Below Average	Poor	Not Known	
Expresses thoughts with clarity							
Develops and maintains friendships							
Team player							
Learns from others							
Overall social maturity							
Strength of self-image							
Awareness of strengths & weaknesses							
Emotional stability							
Overall emotional maturity							
Consistent spiritual walk							
Proven ministry ability							
Devotional life							
Overall spiritual maturity							
Common sense and judgment							
Self-discipline							
Dependability							
Initiative							
Overall personal maturity							
Suitability for work with children	Excellen t	Above Average	Average	Below Average	Poor	Not Known	
Interest in interacting with children							
Success at interacting with children							
Ability to talk conversationally with children							
Tendency to not be upset by a child's misbehavior							
Training or education for working with children							
Skillfulness that you have observed when applicant is							
working with children							
Your willingness to leave your own child with applicant							
Your level of comfort with applicant teaching children							
Your level of comfort with applicant correcting children							
Your level of comfort if the applicant were to serve with							
you personally in a children's group	1	I	I	Ī		[	

Applicant's Name:	Date:
Your Name:	
1. Please summarize the applicant's strengths and abilities.	
2. Please summarize the applicant's weaknesses and areas of need.	
3. How does this person respond under difficulty and stressful circumstances?	
4. Are there any reasons that cause you to lack confidence in this applicant? If so, pleas	se explain:
5. Are there any "red flags" or reasons why you would be uncomfortable with this person any child maltreatment allegations – true or untrue – that have been made against the anecessary):	
6. Overall, what recommendation would you give for this applicant?	
I would <u>not recommend</u> this person for work with children/teens.	
I would <u>be apprehensive about recommending</u> this person for work wi	
I believe without reservation that this person is well qualified for work	c with children/teens
7. Please give any additional comments you feel would be helpful in assessing this appli	icant