

ANNISTOWN ROAD BAPTIST CHURCH TUTORING MINISTRY

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Name _____ Date _____

Home address _____ Occupation _____

_____ Date of Birth _____

Home phone number _____; Work phone number _____; E-mail _____

Do you have a personal relationship with Jesus Christ? Briefly Describe _____

How long have you attended ARBC? _____ Please list services and/or classes that you regularly attend: _____

List any gifts, training, education or other factors that have prepared you to work with children.

Please list any other ARBC ministries in which you are involved: _____

Indicate your tutoring preference for age of student, grade level and/or subject area: _____

Three Local Personal References:

NAME

ADDRESS

TELEPHONE

RELATIONSHIP

Volunteer Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references, churches, or other organizations listed in this application to give you any information they may have regarding my character and fitness for working with children. I release all such references from liability for any damage that may result from furnishing such evaluations to you, and I understand that any omission of material fact on this application may be grounds for rejection of this application. I understand this information will be kept confidential and will be seen only by members of the ministerial staff.

Should my application be accepted, I agree to be bound by the bylaws and policies of Annistown Road Baptist Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I understand that my church desires to respect its children, and, therefore, give my permission for church leadership to conduct a criminal background check on me.

I further state that I have carefully read the foregoing release and know the content thereof. I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

Signature

Date