



Team Member Application

Area of Ministry _____

Date _____

The Bridge Community Assembly of God Church

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors, use and/or responsibility of church vehicles and resources, interaction with sensitive or confidential information, and the handling of money. This form is being used to help The Bridge Community Assembly of God Church provide a safe and secure environment for all who participate in our ministries and use our facilities. This form gives The Bridge Community Assembly of God Church the right to run a comprehensive background screening on the applicant and renew the screening whenever necessary.

**If you are applying to volunteer with BridgeKids, P31&Rangers, or Vertical Youth, you will receive an email within 7 days that gives you access to the Child Abuse Training. You will have 14 days to complete the course.

CONFIDENTIAL

(This form will be viewed only by the Pastors and Church Officers, and will remain secured and confidential)

Date: _____

Full Name: _____ Date of Birth: _____
Full Last Full Legal First **FULL MIDDLE**

Present Address: _____
Number Street City State Zip

Gender: Male _____ Female _____

Home Phone #: _____ Cell Phone #: _____

Email: _____

Social Security Number: _____ - _____ - _____

Do you have a current Driver's License? Yes ____ No ____ If yes, list the state, license number and expiration date:

State: _____ License #: _____ Expires: _____

Identify must be confirmed with social security number and a state driver's license. Please list any addition address where you have lived within the past 5 years.

Address: _____
Number Street City State Zip

Address: _____
Number Street City State Zip

Address: _____
Number Street City State Zip

Address: _____
Number Street City State Zip

CHURCH HISTORY and PRIOR CHURCH WORK

Have you been attending The Bridge Community Church for at least the last 6 months? Y/N

List name and address of other churches you have attended regularly during the past five years, if different from present home The

Bridge: _____

List all church work involving similar responsibilities you have been involved in during the past five years (identify

church, work performed, and dates): _____

List any gifts, callings, training, education or other factors that have prepared you for children/youth work:

When and where did you receive Jesus as your personal Lord and Savior? _____

Have you ever been convicted of or pleaded guilty to a crime? Yes _____ No _____ If yes, please explain in detail (attach a separate page).

Have you ever been convicted of child neglect, child abuse or a crime involving actual or attempted sexual molestation of a minor? Yes _____ No _____ If yes, please explain in detail (attach a separate page).

Are you presently dependent upon illegal substance/drugs? Yes _____ No _____

Have you ever been hospitalized or treated for alcohol or substance abuse? Yes _____ No _____

Have you ever been arrested or convicted for the sale of drugs? Yes _____ No _____

PERSONAL REFERENCES

(Not family members or relatives)

Applicant's Name (Please Print): _____

Name: _____

Address: _____

Phone #: _____ Email: _____

How long have they known you? _____

Name: _____

Address: _____

Phone #: _____ Email: _____

How long have they known you? _____

INSTITUTIONAL REFERENCES (If Applicable)

(Organizations that you have worked with minors)

Organization: _____

Address: _____

Phone #: _____ Email: _____

How long did you work there? _____

In what capacity? _____

Organization: _____

Address: _____

Phone #: _____ Email: _____

How long did you work there? _____

In what capacity? _____

APPLICANT'S STATEMENT

The information in this application is correct to the best of my knowledge. I authorize any references or Churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness from children/minor work. I hereby release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf. I further authorize The Bridge Community Assembly of God Church to conduct a criminal background investigation if such a check is deemed necessary.

Should my application be accepted, I agree to be bound by the bylaws and policies of The Bridge Community Assembly of God Church and to refrain from unscriptural conduct in the performance of my services on behalf of the ministries of The Bridge Community Assembly of God Church.

Applicant's Signature: _____

Date: _____

Witness: _____

Date: _____

Carefully complete this form, answering every question and filling in every request for information, and return it to:

*The Bridge Community Church 8776 James
Madison Hwy
Warrenton, VA 20186
540-341-7409*