

Picture Here
(office use)

NAME _____

DATE _____

SERVICE AREA _____



MINISTRY APPLICATION

COMPASS BIBLE CHURCH

140 Columbia

Aliso Viejo, CA 92656

Susan Grover – Director of KIDS Ministry

www.compasschurch.org

Phone: (949) 540-0699



KIDS Ministry Application Compass Bible Church

This survey is to be completed by all who desire a ministry position involving the supervision or custody of minors. It is being used to help the church provide a safe and secure environment for children who participate in our program and use our facilities

Name _____ Date _____
Last First MI

Address _____
Street City State Zip

How long at this address? _____ If less than five years give previous address and number of years:

Years _____ Address _____

Home Ph. _____ Work Ph. _____ Cell Ph. _____ Best time to call _____
A.M. / P.M.

Email address _____

Marital status _____ Spouse's name (if applicable) _____ Phone _____

No. of children _____ Ages _____ Emergency contact _____

Have you put your faith and trust in Jesus Christ? yes no If yes, please give date & an explanation below:

Have you been baptized since you put your faith in Christ? yes no If yes, specify date: _____

How long have you been attending CBC? _____

Have you gone through the CBC Partners Program? Yes No Comment? _____

Please check the services or groups you attend regularly:

Saturday - 5:00pm Sunday 9:00am 11:00am Thursday Compass Night Other _____

Please list any other CBC ministries in which you are involved. _____

What leadership/volunteer experience have you had with children? List all previous church work involving children and youth. Identify place and type of work – list supervisors with phone numbers. _____

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

In what area of ministry do you desire to be involved? Check below. Comment? _____

Age/Grade preferences:

- Infants / Toddlers
- Early Childhood (2 year old - kindergarten)
- 1st / 2nd
- 3rd / 4th
- 5th / 6th
- Special Needs
 - Buddy Up: one-on-one mainstream kids
 - Compass Friends: non-mainstream kids
- Anywhere

Involvement preferences:

- Saturday **PM**: 5:00
- Sunday **AM**: 9:00 11:00
- Tuesday **KIDS Bible Club WBS**: **AM**: 8:45 -11:45 **PM**: 5:45-8:45
- Wednesday **KIDS Bible Club WBS**: **AM**: 8:45 – 12noon
- Thursday **KIDS Bible Club Nav. Mo.:** **AM**: 8:45-12noon
- Thursday **KIDS Bible Club Thrive**: **PM**: Ages Inf. – 3's, 6:00-8:30
- Thursday **AWANA Club**: **PM**: 6:15-8:30
- Friday **KIDS Bible Club Nav. Mo.:** **AM**: 8:45-12noon
- Friday **The Edge** (5th/6th Grd.Youth Group): **PM**: 5:45-8:30 every other
- Special Events: Office Support:

Applicant's Name _____ Phone _____

Occupation _____ Employer _____ Phone _____

Social Security _____ - _____ - _____ Birth Date _____ Driver's License _____
MO DD YR NUMBER EXPIRES

Do you have any medical training or are you CPR certified? yes (if yes, explain below) no

PERSONAL REFERENCES (MUST BE 18 YEARS OR OLDER AND NOT RELATED TO YOU) **Please complete all information requested.**

Name _____

Email Address _____ Phone _____

Name _____

Email Address _____ Phone _____

Name _____

Email Address _____ Phone _____

The questions listed below are part of our interview process to help provide a safe and secure environment for our children. All information is held in strict confidence by the Compass KIDS staff. Answering "yes" to any of these questions may not necessarily preclude your involvement in Compass KIDS.

Have you had any past experiences that may hinder your productive ministry with children? yes no

If yes, would you like to meet with a pastor? yes no

Have you ever been hospitalized or treated for alcohol or substance abuse? yes no

Have you ever been convicted of, pled guilty or pled no contest to a crime other than a minor traffic violation, or are you now under charges for any criminal offense? A criminal conviction will not necessarily disqualify you from consideration for involvement. yes no

Are there any circumstances involving your lifestyle or background that would call into question your ability to work with children? yes no (Please explain)

Legal stipulations require the church to run a background check. Please fill out completely and sign the enclosed Authorization for Release of Background information. California AB655 requires that a copy of the report be given to applicant if requested. Please indicate your choice by checking one of the following boxes:

yes no

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 the application to give you any information they may have regarding my character and fairness for working with children, and I release all such references from liability for any damage that may result for furnishing such evaluations to Compass Bible Church.

KIDS Ministry Team Agreement

Having committed to serving in the KIDS Ministry and the habits essential for spiritual maturity, I commit to:

1. Prepare for ministry by maintaining my personal relationship with Christ.
2. Support the teaching ministry by praying for the church and KIDS Ministry staff, other team members, and specifically, the children in my care.
3. Cooperate with other ministries and place the greater good of the whole body over the needs of my ministry.
4. My personal growth and education by participating in training opportunities.

Should my application be accepted, I agree to follow the policies of Compass Bible Church and to refrain from unbiblical conduct in the performance of my services on behalf of the church.

I understand that my personal information will be treated as confidential.

I have read and agree with the following:

- CBC Purpose and Values
- CBC Doctrinal Statement
- KIDS Ministry Mission Statement
- KIDS Ministry Operating Principles

Applicant's signature _____ Date _____

Applicant Checklist (for office use only)

Interview date _____ By _____

Training dates _____

Personal reference checks completed _____
initial

Work reference checks _____
initial

Placement

Day/Hour _____ Age/Grade _____

Position _____ Start Date _____

Comments _____

Confirmed with applicant on _____ By _____



Permission to Obtain a Background Check

(This form authorizes the church to obtain background information and must be completed by the applicant. The church must keep this completed form on file for at least two years after requesting a background check.)

I, the undersigned applicant (also known as “consumer”), authorize **Compass Bible Church** to procure background information (also known as a “consumer report and/or investigative consumer report”) about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Compass Bible Church, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act upon my request.

Signature: _____ Date: _____

Identifying Information for Background Information Agency (also known as “Consumer Reporting Agency”)

Print Name: _____
 First Middle Last

Other Names Used (alias, maiden, nickname): _____

Current Address: _____
 Street /P. O. Box City State Zip Code County Dates

Former Address: _____
 Street /P. O. Box City State Zip Code County Dates

Social Security Number: _____ - _____ - _____ Daytime Telephone Number: _____
(required)

Driver’s License Number: _____ State of Issuance: _____ Date of Birth: ____/____/____

Gender _____

Email Address: _____

Office use only:

Date of Background Check Order: _____ Order No.: _____ Initials of Preparer: _____

Results of Order: _____

