

Are you a member of Cornerstone Evangelical Free Church? Yes No

If Yes, please continue to "Covenant of Commitment." If No, please complete the following.

(Membership is not required to volunteer at Cornerstone.)

PERSONAL TESTIMONY

Do you have a personal relationship with Jesus Christ? Yes No Unsure

Briefly explain your testimony:

Please read Cornerstone's Doctrinal Statement before continuing to the following question

Cornerstone's Doctrinal Statement can be found at <http://www.prescottcornerstone.com/belief/>

Do you disagree with any of the beliefs of Cornerstone Evangelical Free Church?

Yes No (If Yes, please briefly explain) _____

How long have you regularly attended Cornerstone? _____

Church history of the last 10 years:

Church _____ Dates _____ Phone _____

Reason for leaving. Did you leave on good terms? _____

Church _____ Dates _____ Phone _____

COVENANT OF COMMITMENT

I desire to join God in His work ministering to the children and/or youth at Cornerstone Church. As a volunteer in this ministry, I will commit to:

- Follow the safety policies and procedures in place at Cornerstone.
- Prepare for my ministry by growing in my personal relationship with Jesus Christ.
- Be on time and consistent in my attendance. I will inform the staff when I will be absent.
- Attend training classes and ministry related meetings.

NON-DISCLOSURE STATEMENT (For official use only)

To assure the protection & preservation of the confidential information regarding the background records & reference checks of current or potential ministry volunteers, both Cornerstone EFC and I, _____ agree to release any information only to those individuals responsible for the selection and screening of these individuals and to no one else.



VOLUNTEER APPLICATION

Equipping kids to know, grow and show God's love.

This Children's Ministry Application must be completed by all those desiring to serve in a position involving the supervision of minors. This information is confidential, seen only by the Pastor and/or ministry leader.

I, _____ (applicant complete name), hereby authorize Cornerstone Evangelical Free Church and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information, which may be material of my volunteering or employment with Cornerstone Evangelical Free Church.

I release Cornerstone Evangelical Free Church and/or its agents and any person or entity, which provides information pursuant to this authorization, from all liabilities, claims, or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name, and all the information is true and correct to the best of my knowledge.

PERSONAL INFORMATION

Full Legal Name _____
Last First Middle

Other Names Used _____
Alias | Maiden Name

Current Address _____
Street City State Zip

Former Addresses

Street City State Zip

Street City State Zip

Date of Birth _____ Social Security # _____

Drivers License # _____ Male Female

Phone _____ Email _____

Marital Status Married (# of years _____) Single Separated Divorced Widowed

Spouse's Name _____ # of Children _____ Ages _____

Emergency Contact _____
Name Relationship Phone #

Have you ever been accused or convicted of a crime, misdemeanor or felony? Yes No

Have you ever been denied legal custody of your child/children in any legal proceedings? Yes No

Are you currently engaged in any conduct that is contrary to the teachings of the Bible? Yes No

Do you have any health issues that could place the children of Cornerstone at risk? Yes No

REFERENCES (Please include one Pastor or Ministry Leader from Cornerstone or previous church, must be 18 or older and not related to you)

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

PAST MINISTRY OR WORK EXPERIENCE WITH CHILDREN & YOUTH

Church or Organization _____ Phone _____

Brief description of your role and/or responsibilities:

Church or Organization _____ Phone _____

Brief description of your role and/or responsibilities:

WHERE WOULD YOU LIKE TO SERVE?

9:00a

10:30a

Nursery (0-3) Preschool K-2nd grade 3rd-4th grade 5th-6th grade

Nursery helper (females only please) Teacher helper Teacher