

In an effort to protect all of our children, each of us involved in Kids Branch is asked to provide background information so that we can do our very best to ensure the safety and well-being of our children. All information is confidential. Please read the privacy notice at the end of this application.

Name:				
Address:				
City:		Postal Code	::	
Phone Number (H):		Phone Num	ber (C):	
E-mail Address:				
Elementary/Seconda	ry School (should be	e grade 5 or older): Con	npleted Grade	
College/University: `	Years of Study	Prog	gram:	
Occupation/Employe	r:			
How long have you a	attended The Olive B	Branch:		
Interests/Passions:				
Which volunteer role	most interests you?	(please circle all that apply)		
Support Teacher	Lead Teacher	Worship Team Mem	nber Special Ev	ent Assistant
If you circled support	/lead teacher, which	age group would you e	enjoy working with?	(please circle all that apply
6 months - 3 years	JK/SK	Grades 1 - 2	Grades 3 - 4	Grades 5 - 6
Please give us some How would describe		iritual journey. When di	d you become a Chri	ist follower?
What strengths and	experiences do you	bring to Kids Branch? (i.	e. spiritual gifts, skills, know	rledge, passion, etc.)

In order for Kids Branch to provide a safe environment for children we believe it's vital to ask the following questions. Please know all of the following information will be kept confidential by The Olive Branch Community Church.

Yes	No	
		Have you ever been convicted for the use or sale of illegal drugs?
		Have you ever been involved in a program for substance abuse or alcohol abuse?
		Have you ever been convicted of a criminal offense other than traffic violations?
		Have you ever been arrested or convicted for abuse related crimes?
		Have you ever been involved in a civil lawsuit pertaining to the following: sexual harassment, sexual misconduct, immoral behaviour or any conduct involving children, teens or adults?
		Have you ever been involved in a dismissal, disciplinary action, or names as a defendant in a civil or criminal lawsuit as a result of an accident, or injury involving children or teens?
		Are there any circumstances in your lifestyle or background history that would question your ability to work with children as a volunteer? (i.e. pornography, use of illegal substances, addition issues, etc.)
		Are there any health concerns or contagious or communicable diseases that we should be aware of? (i.e. Hepatitis B, AIDS, and or medical conditions, psychological or physical conditions)
		Have you ever been involved in any reprimand, church discipline or expulsion with a denomination or a religious organization or any other organization or business?
		Are you willing to complete a Vulnerable Sector Screening?

If you answered yes to any of the questions above, please elaborate.

A large part of working with children is modelling an appropriate, God honouring lifestyle. Is there anything in your public or private life or on your social media outlets that would disqualify you from doing that? If yes, please describe.

1.	Name of Church/Organization: Dates & Description of Experience:	
	Pastor, Ministry Supervisor or Leader: Phone Number:	
2.	Name of Church/Organization Dates & Description of Experience:	
	Pastor, Ministry Supervisor or Leader: Phone Number:	
3.	Name of Church/Organization Dates & Description of Experience:	
	Pastor, Ministry Supervisor or Leader: Phone Number:	
Ρle	ease list two personal references (must be at least 18 y	years old and not related to you):
1.	Name:	Relationship:
	Phone Number:	E-mail:
2.	Name:	Relationship:
	Phone Number:	E-mail:
Bra sup The	e Olive Branch Community Church liable for any	nission to contact my references and past inteering in Kids Branch. I hereby agree to not hold damage that may result as a consequence of nal information provided will be held confidential by
	Applicant's Signature	Date
F	Parent's Signature (if under 18 years old)	Date
	Director of Children's Ministries Signature	 Date

My present and previous serving/volunteering exposure, ministry, or passion is as follows...