

VOLUNTEER APPLICATION

Bethany Church Ministries



Thank you for your consideration to join our volunteer team at Bethany Church. The information gathered here helps to find the best opportunities for you, as well as helps us to keep in contact with you and learn a bit more about you!

Personal Information

Full Name _____

Address _____

Email _____

Phone Numbers (cell) _____ (home) _____ (other) _____

Emergency Contact (name & phone number) _____

Allergies and other health concerns _____

Spiritual History

Please list the churches you've attended regularly over the past 5 years. Include the name of the church and Pastor, city & address, dates you attended and any ministry & volunteer activities and if you were/are a member.

How long have you attended Bethany Church? _____ OR

What is your current church? _____

Do you attend 2 or more services a month (Sunday morning or youth group)? Yes No

Are you a member? Yes No

Have you been water baptized? Yes No

When did you accept Christ as your Saviour? _____

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Lifestyle

To provide a safe and secure environment for our Church's children and youth, we believe it is necessary to include the following questions as part of our application process. All information will be kept confidential by church leadership and the Plan to Protect team and will not be disclosed by the church unless required by law. Answering yes to any of the questions may not necessarily prevent you from volunteering with the church. Thank you in advance for your understanding.

1. Have you ever been convicted or found guilty of a criminal offence involving children? Yes No
2. Have you ever been convicted or found guilty of a criminal offence of a sexually related crime? Yes No
3. Have you ever been convicted or found guilty of a criminal offence of an abuse related crime? Yes No
4. Have you ever been in treatment for alcohol or substance abuse? Yes No
5. Do you have any contagious diseases or conditions of which we should be aware? Yes No
6. Are you currently in treatment for any form of mental illness? Yes No

References

Please provide the names of three adults, excluding relatives, who could provide a reference for you. Include at least one reference from outside Bethany.

Name of Reference _____ Relationship _____

Email Address _____ Phone _____

Name of Reference _____ Relationship _____

Email Address _____ Phone _____

Name of Reference _____ Relationship _____

Email Address _____ Phone _____

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Ministry Commitment

Expectations of Bethany Church Volunteers based on Biblical Principles:

- Plan your work and ask God how to best use your skills, gifts, and abilities
- Share your concerns openly with the ministry leader and look for new ways to achieve your goals
- Appreciate and compliment the efforts of other volunteers, realizing we are a team
- Have a gracious spirit and personal sensitivity
- Desire to promote the goals of this ministry: to glorify God through serving others
- To maintain a personal relationship with Jesus Christ
- To attend Bethany Church on a regular basis
- To submit to the authority and decision of the Bethan Church Leadership
- To live a Christian lifestyle according to 1 Corinthians 6:9, Galatians 5:19-22 and Genesis 1:27
- Read and agree with the attached PAOC Statement of Essential Truths

By signing below, you agree you have read and understand this Ministry Commitment, and that you commit to withhold the above statements.

Signature of Applicant: _____

Confidentiality Agreement

I understand that I will obtain or have access to sensitive and confidential information in my role as a volunteer. That confidential information may include, without restriction, personal information regarding employees, volunteers, members, attendees, supporters, or persons assisted by Bethany Church including information in relation to donations, personal or family matters, or obtained from background screening of prospective employees or volunteers. I agree to maintain strict confidentiality of all such confidential information and I will not disclose such information to anyone (including to employees, volunteers, members, attendees, supporters, persons assisted, or my spouse or family members) except authorized representatives (Ministry Leads/Pastoral Team) of Bethany Church who need to know such information or as required by law. I understand and agree that confidentiality is very important in my role and critical to the effective functioning of Bethany Church. If I become aware that any confidential information was improperly disclosed, I will immediately advise the Lead Pastor of Bethany Church.

By signing below, you agree you have read and understand this Confidentiality Agreement, and that you commit to withhold the above statements.

Signature of Applicant: _____

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Release of Information & Declaration of Intent

I (the applicant) hereby give Bethany Church consent to verify the information provided by me in this Ministry Application Form. I grant Bethany Church to perform an internet search on me and to review and consider any information found. I consent to the contacting of the references listed on page 2 and release Bethany Church and all references from liability for any damage that may result from evaluations of me. I understand that if Bethany Church approves my volunteer application and later determines, in its discretion, at any time that I am not suitable for volunteer service, the church may terminate my volunteer service or position for any reason without advanced notice. If at any time I determine that for any reason I am unable to support or adhere to or follow the policies, procedures, or doctrine of Bethany Church, I will inform my ministry leader and will resign my volunteer position. To the best of my knowledge, the information provided in this ministry application is true and correct.

Name of Applicant: _____

Signature of Applicant: _____ Date: _____

Name of Parent/Guardian (if the applicant is under the age of 18) _____

Signature of Witness: _____ Date: _____

Name of Witness (staff or member of Bethany Church) _____

Signature of Witness: _____ Date: _____

Thank you for completing your application form! Please remove the attached Statement and save it for your files. Hand this completed form to the ministry leader or into the church office, located in the bottom of the Life 100.7 FM radio building. If you are 18 years of age or older, please make sure you complete your Criminal Record Check with Vulnerable Sector Check (CRC & VSC) at the local police department. See the office for the letter required for the RCMP to complete your CRC & VSC.

Information is being gathered for the purposes of screening and supporting ministry personnel for the ministries of Bethany Church and for determining which, if any ministries that applicant is suited for. All information collected will be stored confidentially and permanently.