



Chase Oaks Church  
 Team Member Application for Minors  
 1700 Gateway Blvd, Richardson, TX 75080

**Please Print Clearly**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender:  Male  Female

Parents' Name \_\_\_\_\_

School \_\_\_\_\_

When did you accept Jesus as your Lord and Savior? \_\_\_\_\_

How long have you attended Chase Oaks on a regular basis? \_\_\_\_\_

Please list current volunteer or ministry experience at Chase Oaks \_\_\_\_\_

Which service(s) do you attend?

Friday 7:00 p.m.  Sunday 9:00 a.m.  Sunday 11:00 a.m.

What area of Children's Ministry do you desire to be involved in?  Nursery (ages 0-3)  Preschool (ages 4-5)

K-1st grades  2nd-3rd grades  4th-5th grades  D-Groups  Library  Pacesetters (special needs)

The questions below are part of our application process in order to help provide a safe and secure environment for our children. All information is held in strict confidence. Answering yes to any of the questions may not necessarily preclude your involvement in Children's Ministry. Thank you for your understanding.

Have you been a victim of physical, emotional or sexual abuse? Yes \_\_\_\_ No \_\_\_\_

Have you ever been convicted for use or sale of drugs? \_\_\_\_

Have you ever been arrested for a criminal offense excluding minor traffic violations? \_\_\_\_

Have you ever been accused, arrested or convicted for any sexually related crimes? \_\_\_\_

Are there any circumstances involving your life-style or your background that would call into question your ability to work with children \_\_\_\_

If you answered yes to any of the above questions, please explain:

**Qualifications & Responsibilities required of a Volunteer**

1. Have attended Chase Oaks regularly for a minimum of 6 months.
2. Attend Children's Ministry trainings and meetings as provided.
3. Function within the guidelines and procedures for the Children's Ministry.
4. Maintain a godly lifestyle, be an example as a leader in the Body of Christ and maintain a growing relationship with Jesus through regular reading of the Bible, prayer and church attendance.
5. Be in agreement with the teaching and ministry of Chase Oaks.



## Background Verification Release Form

### APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address			
City		State	Zip Code
		County	
Social Security Number	Date of Birth	Driver's License Number	State Issued
<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female		<b>Race</b> <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other	

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VERIFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Parent/Guardian's Signature  
(if under 18 years of age)