



"Then they also will answer Him, saying, 'Lord, when did we see You hungry or thirsty or a stranger or naked or sick or in prison, and did not minister to You?' Then He will answer them, saying, 'Assuredly, I say to you, inasmuch as you did not do it to one of the least of these, you did not do it to Me.'"

Matthew 25:44-45 (NKJV)

Volunteer Application Form			
Volunteer Information			
Surname:	Given Name(s):	Middle Name:	
Date of Birth:	Email:	Phone:	
Current Address:			
City:	Province:	Postal Code:	
Marital Status:	Occupation:		
Church Membership			
Are you a KCLC member? (if not; please fill out an application before completing this form) Yes <input type="checkbox"/> No <input type="checkbox"/>			
Emergency Contact			
Name:			
Address:		Phone:	
City:	Province:	Postal Code:	
Relationship:			
Spouse Information (if applicable)			
Surname:	Given Name:	Middle Name:	
Cell:	Email:		
Education / Training Information			
Highest level of formal education and area(s) of study:			
Certification(s) license(s) held that may reflect on your skills and abilities in working with children or as a volunteer:			
Health Information			
List any injury/disability/health factor that might limit your involvement in Ministry activities, or impact the health of children or others (i.e., communicable diseases, physical limitations).			
Personal References			
List below two individuals (other than family members) who could recommend you for this volunteer ministry:			
Full Name	Street Address	Postal Code	Phone
1.			
2.			

Loving you back to life and destiny



Volunteer Application Form

Volunteer Positions

Administration/Operation <input type="checkbox"/>	Altar Intercessory & Prayer <input type="checkbox"/>	Children <input type="checkbox"/>	Communication <input type="checkbox"/>	CSW <input type="checkbox"/>	Ignite (Youth) <input type="checkbox"/>
KLWA <input type="checkbox"/>	Men's <input type="checkbox"/>	Multi-Media <input type="checkbox"/>	New Converts <input type="checkbox"/>	Finance <input type="checkbox"/>	Oasis <input type="checkbox"/>
Product Centre <input type="checkbox"/>	Prime Time <input type="checkbox"/>	YTIC (Youth) <input type="checkbox"/>	Women <input type="checkbox"/>		

Volunteer Application Form

Background

Car Insurance Yes <input type="checkbox"/> No <input type="checkbox"/>	Willing to provide transportation Yes <input type="checkbox"/> No <input type="checkbox"/>
---	---

As a result of concern for the safety and protection of Children and Youth, as well as being apart of the Oasis department we require all potential volunteers to answer the following:

Have you ever been convicted of a crime to which you have not received a pardon?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you been denied legal custody of your children in any legal proceedings, including divorce decrees or settlements?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been accused of, charged with, disciplined for, or convicted of any unlawful sexual conduct, abuse, child abuse, child neglect, and/or child sexual abuse?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you been required to register as a sex offender in any jurisdiction?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If you have answered yes, please supply the date, place, type of contact, disposition, sentence, as applicable.

I understand further that any offers to join Children and/or OASIS ministries is subject to a satisfactory criminal reference check. Any reference information obtained will be kept confidential. _____ **(Applicant's Initial)**

Statement of Accuracy

The information contained in this form is current to the best of my knowledge. I understand that this is strictly a volunteer position, and I expect no remuneration for services and time volunteered.

I authorize any persons giving a reference or churches listed in this form to disclose information that they may have regarding my character and fitness for serving in a volunteer ministry that may involve children or youth. I hereby release any individual, church, or organization from any liability for damages or loss which may result in me, my heirs, or family for compliance with this authorization, and agree that the church may maintain this information. My signature on this form confirms my understanding and agreement that: In the event that allegations of criminal or sexual misconduct arise regarding my conduct while I serve in a volunteer capacity, the church Kingsway Community Life Centre will fully cooperate with any investigation. I further state that I have carefully read the foregoing release and understand the contents thereof, and that I sign this release as my own free act. This is a legally binding agreement, which I have read and understand.

Further, I have read and agree to follow the Volunteer Handbook and I will give my consent for a voluntary criminal check.

Applicant's Signature _____ Date Signed _____

Office Use Only

Received date: ____/____/____	Interview by Leadership Team ____/____/____
Data Entry: ____/____/____	Leadership Team Recommendation: