



Volunteer Application

PCC KIDS
PACIFIC COAST CHURCH

This application is to be completed by all Children's Ministry volunteers. It is to be used to help the church provide a safe and secure environment for children who participate in our programs and use our facilities. All information will be kept confidential. Thank you for your time and interest in working with PCC KIDS!

Legal Name _____ Male Female Today's Date _____
First Middle Last

Email Address _____ Cell Phone No. _____ Text ok? yes no

Address _____ Date of Birth _____
Street City State Zip mm/dd/yyyy

Occupation _____ Employer _____

Spouse's name (if applicable) _____ Phone _____
First Last

Emergency contact _____ Phone _____
First Last

T-shirt Size: Adult X-Small Small Medium Large X-Large Other _____

Have you accepted Jesus as your Lord and Savior? yes no

Brief description of when and how you became a Christian

How long have you attended PCC? _____ If less than 6 months, list previous church name and city/state.

Have you attended a Discovery Class? yes no Are you a member? yes no

Have you been baptized? yes no

Are you involved in a Grow Group? yes no

List any other PCC ministries in which you are involved

Experience

List any leadership/volunteer experiences you have had with kids

List any training or education that has prepared you to work with kids

How do you envision these being utilized in ministry?

Availability (Check all that apply)

Sunday Service Team: 8:30am (arrive by 8am) 10:15am (arrive by 9:50am)

Infants Toddlers Age 2 Age 3 Age 4/5 (Not in Kindergarten) K-1st grade

2nd - 3rd grade 4th - 5th grade Kids Kiosk Worship

Heroes, Inc. Kids Grow Group: Infants-Toddlers Age 2-4 K-2nd grade 3rd-5th grade

Personal References (must be at least age 18 and not related to you)

1. Name _____ Relationship _____
Phone _____ Email _____

2. Name _____ Relationship _____
Phone _____ Email _____

Personal Information (Age 13 and older)

It is our desire that the lives of our volunteers are a model to the kids in our ministry. Please answer the following questions accordingly. Any concerns will be reviewed and discussed with PCC Kids staff.

___ yes ___ no Are there any circumstances in your past that would call into question your ability to work with kids and to model a Christ-like character to them (i.e. addictions, adultery, pornography, history of violence, etc.)?

___ yes ___ no Have you ever been hospitalized or treated for alcohol or substance abuse?

___ yes ___ no Have you ever been convicted of, pled guilty or pled no contest to a crime other than a minor traffic violation, or are you now under charges for any criminal offense?

___ yes ___ no Have you ever been denied legal custody of your child/children in any legal proceeding including divorce decrease or settlements?

___ yes ___ no Have you ever had a restraining order against you?

___ yes ___ no Do you identify or live as a gender other than the gender assigned at birth?

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

Background Check (Age 18 and older must complete next page)

Legal stipulations require the church to run a background check, applicants over age 18. Please fill out completely and sign the enclosed Authorization For Release of Background Information. California AB 655 requires that a copy of the report be given to applicant if requested. Please indicate your choice by checking one of the following boxes: ___ yes ___ no

Agreement

I understand that being involved in Children’s Ministry at Pacific Coast Church, I am making a commitment to the following responsibilities:

1. I will maintain my personal relationship with Christ through Bible reading, fellowship with other Christians, and regularly attend worship services.
2. I will pray regularly for the ministry and for the children for whom I am responsible.
3. I will cooperate in a spirit of unity and loving support with my Children’s Ministry Director, support staff, and volunteers.
4. I will provide a safe and fun environment for the children to whom I am responsible.
5. I will make every effort to attend all volunteer trainings and enrichment classes offered.

The information contained in this application is correct to the best of my knowledge. I authorize any references, churches, or instructions listed on this application, including law enforcement agencies, to give any information regarding my character, background, and fitness to serve in Children’s Ministry. I agree to follow the policies of Pacific Coast Church and to refrain from unbiblical conduct in the performance of my services on behalf of the church.

Applicant’s signature _____ Date _____

Parent Signature _____ Parent Name _____
(for applicants under age 18) (printed)

Parent Email _____ Parent Contact Number _____