

This form is to be completed by all applicants for any position involving the supervision or custody of minors. The information on this form will be used by the church provide a safe and secure environment for the children and youth who participate in church-sanctioned ministries and programs. All of your answers are confidential and securely file.

Return your completed form to the church office:

Mail or drop off: Gulf Coast Community Church, 555 76th Ave. No., St. Petersburg, FL 33702.

Email: frontdesk@gccc.net

Personal Information

Name (Last)		(First)	Middle
Phone #	Email		
Address			
City		State	ZIP
List your previous address for the last 5 years.			
Previous Address			
City		State	ZIP
Previous Address			
City		State	ZIP
Previous Address			
City		State	ZIP
Previous Address (Last 5 Years)			
City		State	ZIP

Criminal History (Your answers are confidential)

Have you ever been convicted of, or plead guilty to a crime?	Yes	No
If yes, please explain:		
Have you ever had allegations, complaints, or been arrested for domestic violence, child abuse, or child neglect?	Yes	No
If yes, please explain:		
Have you at any time during the past five years viewed, or participated in the creation, dissemination, or transmission of, or otherwise used, child pornography?	Yes	No
If yes, please explain:		
Although these can be difficult questions for some, we are required to ask it. If you prefer, you may refuse to answer this question and/or discuss your answer in confidence with a pastoral staff member. Answering yes, or leaving the question unanswered, will not (automatically) disqualify you from participating in our Children's Ministry.		
I agree to notify Gulf Coast Community Church if at any time there is a change in status regarding my criminal history.		

Prior Experience Working with Minors

Have you ever been licensed and employed and in the field of child care?	Yes	No
If yes:	State	County

Church History

Please list the name and addresses of the churches of which you were a member in the past five years.

Church Name	Address, City, State, Zip

List all your previous church work involving youth and children. Please list your ministry pastors/leaders as references below.

Church Name	Dates of Service	Type/Name of Ministry

List all your previous **non-church** work involving youth and children.

Organization Name and Address	Dates of Service	Type of Work

Personal References (Please include prior children's ministry pastors/leaders as references. Do not list family members.)

Name	Address	Email Address	Phone Number

Acceptance of Guidelines

I agree to observe all the children's ministry guidelines provided (written and verbal).	Yes	No
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Position

If you are interested in serving in a specific area(s), please select as many areas as you like.

<input type="checkbox"/> 0-2 Years Olds	<input type="checkbox"/> 3- 5 Year Olds	<input type="checkbox"/> Check-in Team	<input type="checkbox"/> Safety Team
<input type="checkbox"/> 1 st & 2 nd Grades	<input type="checkbox"/> 3 rd , 4 th & 5 th Grade	<input type="checkbox"/> Breakout	<input type="checkbox"/> Other:
<input type="checkbox"/> I'm happy to serve wherever needed!			
When can you serve?	<input type="checkbox"/> 1 st week <input type="checkbox"/> 2 nd week <input type="checkbox"/> 3 rd week <input type="checkbox"/> 4 th week	<input type="checkbox"/> 5 th Sunday (four times per year)	<input type="checkbox"/> Substitute

Applicant's Statement and Verification

I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW AND UNDERSTAND THE CONTENTS THEREOF. I SIGN THIS RELEASE AS MY OWN FREE ACT. THIS IS A LEGALLY BINDING AGREEMENT THAT I HAVE READ AND UNDERSTAND.

Further, I affirm that I have neither been convicted of nor pleaded guilty to, nor am I the subject of pending charges for, any crime or misdemeanor involving actual or attempted child abuse or neglect or sexual molestation, including but not limited to murder, abduction for immoral purposes, child pornography, sexual assault, taking indecent liberties with children, neglect of children, or other moral impropriety involving children, in the state of FL or any other state, country or jurisdiction. I will be required to consent to Gulf Coast Community Church a criminal conviction records check from the Central Criminal Record Exchange or comparable criminal records and/or background check upon request, and consent to realizing the importance of promoting Gulf Coast Community Church's ability to protect those under its care.

I agree to be bound by all policies, standards, and regulations of Gulf Coast Community Church, including but not limited to Gulf Coast Community's Child Protection Policy, and to refrain from all illegal and/or improper conduct in the performance of my services on behalf of Gulf Coast Community Church.

I authorize any references of church listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children/youth work. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf.

Should my application be accepted, I agree to be bound by the policies of Gulf Coast Community Church to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I hereby affirm and acknowledge, by signing immediately below, that all of the information provided and all of my answers to the foregoing questions are true and complete, and that any misrepresentation or omission may be grounds for rejection or, if later engaged as a volunteer or employed, dismissal. I declare that the foregoing is true and correct.

Signature (Please enter your first and last name and middle initial and check the box, parents must sign with child under age 18)

First, Last, MI	
<input type="checkbox"/>	I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.
<input type="checkbox"/>	I could not in good conscience sign for the following reason:
Date:	

Authorization for Criminal Background Check

I hereby authorize Gulf Coast Community Church to conduct a criminal background check using the services of any law enforcement agency, government agency, or reporting institution to gain any needed information concerning my criminal background including allegations, complaints, arrests, and convictions. Furthermore, I hereby release any of the above agencies or institutions from any and all liability resulting from such disclosures.

First, Last, MI			
<input type="checkbox"/>	I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above.		
<input type="checkbox"/>	I could not in good conscience sign for the following reason:		
Date			
Maiden Name if Applicable	Gender		
Date of Birth	Place of Birth	City	State
List all Aliases			
Social Security Number*			

*SSNs are purged from our system after your background check is completed.