

1330 E Lugonia Ave.Redlands, CA 92374909-793-2035



Youth Application for Volunteer Work

www.newliferedlands.com

This form is designed to help us provide a safe and secure environment for the children and youth who participate in our program. It is also designed to ensure the personal dignity of all who are involved in serving them. The information on this application will remain confidential, in keeping with the legal requirements of New Life Foursquare Church / Kids Connection Community Outreach Program. This is not an application for employment.

Date			
Last Name	First	Middle	
Name of Parent / Gua	rdian		
Street Address		City St	tate Zip
Phone			
hich areas of KC progra		lunteer Interest	
Thich age group do you p	orefer to work with?		
re you available □ week	ly □ bi-weekly □ monthly	y Minimum length of commitmen	t
		References	
		ople who are over 18 years of age and are working with children or youth.	able to provide a reference
Name	Years Known	Address	Phone Number

Personal Information

If you prefer, you many discuss your answers to the following question in person rather that answering them on this application. Answering yes, or leaving the question unanswered, will not automatically disqualify you as an applicant for volunteer work with children or youth.

			erforming certain types of activi-
Is there any circumstance or p or would compromise the inte	attern in your life which woul grity of our church / program?	d make it inappropriate for yo □ Yes □ No If yes, please	u to serve with children or youth, explain:
Have you ever been convicted minor? □ Yes □ No If yes,	-	-	empted sexual molestation of a
Have you been a victim of abu What have you done to resolve	,		
Have you ever had a traffic ci	tation that was over \$500* \Box	Yes □ No If yes, please ex	plain in box below.
Have you ever been convicted does not automatically disqua	•	Yes □ No If yes, please exp	plain in box below. A Yes response
		•	ted by applicable law from disclosure "no contest" plea, whether or not a
Do you have any criminal cha	rges pending against you? 🗆 🗅	Yes □ No If yes, please exp	lain in box below.
If you are unsure how to with your criminal attorney before		not know whether a conviction n	neets these criteria, please consult
Provide explanation below if tions. (Use a separate page if	,	ffic citation, criminal conviction	on, and/or pending charges ques-
Date	Location	Charge	Disposition

Faith Based Program

•	aith based program. Do you agree to participate in leading, teaching in all situations. Yes No If no, please explain:
Parent	tal / Guardian Permission
I understand that my child is making an important comunity Outreach Program. I give my permission for	ommitment to serve the children and/or youth of Kids Connection Commy child to perform that service.
Signature of Parent / Guardian	Date
\mathbf{A}_1	pplicant's Statement
$\mathbf{A}_{\mathbf{j}}$	pplicant's Statement
cation to give any information (including opinions) that children or youth. I release all such reference from any in good faith and without malice. I waive any right that	t to the best of my knowledge. I authorize any reference on this appliant they may have regarding my character and fitness for work with a liability for furnishing such evaluations to you, providing they do so t I may have to inspect references provided on my behalf.
I understand this is not an application for employment.	
<u>*</u>	Xids Connection takes abuse very seriously and that abuse in any form in abuse of any form is cause for my removal from volunteer service.
I understand that it is my responsibility to watch all saf Connection and submit worksheets that coincide with t	fety child protection videos provided by New Life Foursquare / Kids the videos.
https://vimeo.com/groups/302187 Child Protection Video	os estados esta
Signature of applicant	Date
Staff approval	Date