

ANNUAL RENEWAL APPLICATION FORM FOR PERSONS WHO HAVE PREVIOUSLY BEEN SCREENED TO WORK/VOLUNTEER WITH VULNERABLE PERSONS

This application is to be completed by all persons (volunteers or paid) who desire to work with vulnerable persons in our ministries *and* who have been previously screened and accepted for work with vulnerable persons by our church.

PERSONAL

Date _____

Name _____

Last _____ First _____ Middle _____

Former Name (if applicable) _____

Present Address _____

City _____ State _____ Zip _____

Home phone _____ Cell phone _____ Work phone _____

Have you ever been charged with, convicted of, or plead guilty or no contest to a crime against vulnerable persons or other persons? ☐ NO ☐ YES (If yes, please explain)

Have you been screened and accepted by your local church to work with vulnerable persons? ☐ NO ☐ YES

Have you ever participated in or been accused of any act of child abuse or sexual misconduct against a vulnerable person? ☐ NO ☐ YES (If yes, please explain)
