



Volunteer Form

Please fill in all blanks and provide \$10 to cover the cost of the background check.

IN ORDER TO WORK WITH CALVARY KIDS, YOU MUST CONSENT TO A BACKGROUND CHECK. PLEASE GIVE YOUR SOCIAL SECURITY NUMBER AND DATE OF BIRTH.

Personal Information

Name: _____ Phone number: _____
(Print) _____
 First Middle Last

Date of birth: _____

Maiden Name: _____ SSN: _____

Address: _____ County: _____

City, State: _____ Zip: _____

Email: _____

Have you read the above Worker's Covenant and "We Believe" statement?	YES	NO
Are you a born-again believer with Jesus Christ as your Lord and Savior?	YES	NO
Do you agree with our position to be free from the use of harmful drugs? (street drugs, nicotine, alcohol, etc.)	YES	NO

Getting to know you . . .

Area(s) of expertise: _____ Days available: M T W TH F

Hours available: _____

Age(s) preferred: _____

How long have you been attending Calvary Assembly
or your home church? _____

What other ministries are you currently (or have
been) involved with? _____

Please give us a short testimony on how you came to Christ and what Jesus means to you.

Have you ever been convicted *or accused* of any criminal offense? (Including child molestation or child abuse.) If so, explain.

Have you ever been a victim of child sexual abuse? **YES** **NO**
(This question is our legal obligation and not a part of the screening process criteria.)

List the name(s) and address(es) of other churches you have attended regularly during the past five years.

Signature: _____ Date: _____



Calvary Learning Center

DISCOVER PURPOSE-DRIVEN EDUCATION