

The Lutheran Church of the Holy Spirit Volunteer or Employment Application Form

*For persons working with minors (children and/or youth)
This form needs to be used in conjunction with the Background Investigation Consent Form.*

It is the goal of The Lutheran Church of the Holy Spirit to create a safe and secure environment for all minors and workers or volunteers who are involved in church activities. To facilitate this emphasis, it is necessary to gather pertinent information from those who desire employment or offer volunteer services to our children and youth programs. This information will be used for the sole purpose of helping the church provide a safe and secure environment for minors who are entrusted to our care and adults who volunteer or work with them.

Full Name: _____ Today's Date: _____

Date of birth: _____

Phone number (Home): _____ (Work): _____

Cell: _____ Email: _____

Preferred Method of Communication _____

Please respond to all questions below that apply to the position for which you are applying/volunteering.

Position applying/volunteering for: _____

When are you available to work? _____

Do you have a valid driver's license? _____ Commercial license? _____

License number: _____ State issued: _____

Current employer: _____ Length of employment: _____

Name of supervisor: _____ Phone number: _____

Previous employers:

Employer: _____ Dates employed: _____

Employer: _____ Dates employed: _____

Employer: _____ Dates employed: _____

Employer: _____ Dates employed: _____

Employer: _____ Dates employed: _____

Employer: _____ Dates employed: _____

Is there any reason why you should NOT work with or around minors? _____

If yes, please explain:

Are there any physical limitations which may limit your full participation in an event? Please explain:

Please list your education background (for employment only):

	School Name	Graduate?	Year	Degree or course of study
High School:	_____	_____	_____	_____
College:	_____	_____	_____	_____
Graduate School:	_____	_____	_____	_____
Other:	_____	_____	_____	_____

Please provide the following church information:

How long have you attended Lutheran Church of the Holy Spirit? _____

Are you a member? _____

If not attending Holy Spirit, what, if any, church affiliation do you have? _____

Name of other Congregation _____

List other churches with which you have been affiliated: _____

Have you ever worked with minors (youth or children)? _____ List where:

Please list three **references** (must be of a business or organizational nature):

Name: _____ Phone: _____

Address: _____ Years known each other: _____

Name: _____ Phone: _____

Address: _____ Years known each other: _____

Name: _____ Phone: _____

Address: _____ Years known each other: _____

Background Check Information

When reviewing an applicant's background checks, the following offenses will be taken into consideration:

I. Failure to disclose criminal history. This includes convictions and deferred adjudication (sentencing). False statements are subject to immediate termination of work or volunteering at the Lutheran Church of the Holy Spirit and to the penalties of 18Pa.C.S.A. §4904, relating to unsworn falsification to authorities.

2. Probation. Consider if applicant is currently, or has been, on probation for a crime.

3. Pending charges. Even if the court has not heard the charge, applicant should disclose any pending charges. If there are pending charges of any of the below, employment or volunteer work with minors will be deferred until the charges are upheld or cleared.

4. Adjudicated cases. Consider if applicant has been convicted or sentenced for any of the following offenses (ex: disqualifying offenses from PA statute):

A. An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

Chapter 25 (relating to criminal homicide, capital murder or murder).

Voluntary or involuntary manslaughter.

Section 2702 (relating to aggravated assault or assault with a deadly weapon).

Former section 2709(b) (relating to stalking).

Section 2709.1 (relating to stalking or harassment).

Section 2901 (relating to kidnapping).

Section 2901 (relating to unlawful restraint).

Section 3121 (relating to rape).

Section 3122.1 (relating to statutory sexual assault).

Section 3123 (relating to involuntary deviate sexual intercourse).

Section 3124.1 (relating to sexual assault).

Section 3125 (relating to aggravated indecent assault).

Section 3126 (relating to indecent assault).

Section 3127 (relating to indecent exposure or public lewdness or indecency with a child).

Section 4302 (relating to incest).

Section 4303 (relating to concealing death of child).

Section 4304 (relating to endangering or injuring the welfare of children).

Injury to a child, elderly or disabled person

Section 4305 (relating to dealing in infant children).

A felony offense under section 5902(b) (relating to prostitution and related offenses).

Section 5903(c) or (d) (relating to obscene and other sexual materials and performances).

Section 6301 (relating to corruption of minors, including child prostitution and child pornography).

Section 6312 (relating to sexual abuse of children).

(b.) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."

(c.) An out-of-State or Federal offense similar in nature to those crimes listed in Clauses (a) and (b).

Have you ever been the subject of an investigation for any of the offenses listed above? If yes, please provide details here or on another sheet of paper:

I hereby give permission to make a thorough investigation of my past employment, education, and background, and release from liability all persons, companies, or corporations supplying such information. I also release The Lutheran Church of the Holy Spirit from any liability that might result from making such an investigation. I understand that any false statements or implications made by me on this application or other required documentation shall be considered sufficient cause for denial of employment or discharge.

Signature: _____ Date: _____