

Employment Application

Name: _____
Last: First: Middle:

Cell Phone: (____) - ____ - ____ Home Phone: (____) ____ - ____

Email Address: _____

Address: _____
(Street) (City) (Zip)

Occupation: _____ Employer: _____

Work: ____ PT ____ FT ____ Student Marital Status: ____ S ____ M ____ D ____ W

Previous Experience

Please list any previous ministry or child care experience:

What gifts are you hoping to use in working with children:

Church Attendance

Legacy Bible Church: Member How long have you been a member? _____

Non-member How long have you been attending Legacy? _____

Do you plan to attend Discovery Class to learn more about Legacy? _____

If you do not attend Legacy, what church do you attend: _____

Please list any areas where you are currently involved at Legacy (i.e. women's ministry, men's ministry, students, First Impressions, etc):

Please write a brief history of your relationship with Jesus.

References

Please list two or more character references, none of which may be a relative, who know you well and that we may contact. For each reference, please provide the following information:

Reference #1:

Name: _____ Phone #: _____

Email: _____

Nature and Length of Relationship: _____

Reference #2:

Name: _____ Phone #: _____

Email: _____

Nature and Length of Relationship: _____

Reference #3:

Name: _____ Phone#: _____

Email: _____

Nature and Length of Relationship: _____

Code of Conduct and Background Check Release

Please initial next to each statement to indicate your agreement.

- _____ I desire to embody the gospel in all my behavior, especially as I care for children during any activity sponsored by Legacy Bible Church. I will aim to demonstrate my love for the Lord Jesus, my gratitude for His grace and forgiveness, and testify to the power of the Holy Spirit working in my life.
- _____ I desire to demonstrate respect, loyalty, patience, courtesy, and maturity.
- _____ I will treat all children with respect and consideration.
- _____ I will not abuse children/youth, in any way, including but not limited to:
- i. Physical abuse (e.g. strike, shake, slap)
 - ii. Verbal/Mental abuse (e.g. humiliate, degrade, threaten)
 - iii. Sexual abuse (e.g. inappropriate touch, or exposure)
- _____ I will not possess or use illegal drugs. I will not possess or use alcohol or tobacco in the context of my service.
- _____ I will not use or tolerate profanity in the presence of children.
- _____ I understand that any violation of this agreement may be grounds for dismissal, discipline, or other action by the church.

Have you ever engaged in any conduct that would be regarded as criminal child abuse or neglect?	Yes	No
---	-----	----

Do you have any contagious disease, health issue, or history of emotional illness that would currently place children, other workers, or yourself at risk?	Yes
--	-----

Do you have any reason to believe that your background check will disclose any information that would suggest that you should not serve in the Children's Ministry?	Yes	No
---	-----	----

If you answered yes to any of the above questions please explain below.

I recognize that, as a condition of my employment, any reference may be contacted, a background check will be made and a criminal history check may be conducted, and I willingly consent to all such checks. I further authorize my references to give you any information they may have regarding my character and fitness for

working with children and/or youth. I release **Legacy Bible Church** and all such references from any and all liability for any damage that may result from furnishing such evaluations to you, and I waive any right that I have to inspect references provided on my behalf.

I understand that if I have questions about this Code of Ethics, any church policies, or any aspect of my employment with **Legacy Bible Church**, I will contact my immediate supervisor or the Children's Ministry Director.

Full Legal Name: _____ (_____)
Last First Middle Maiden

Date of birth: ____ / ____ / ____ City of Birth _____ County _____
Mo. Day Yr.

Driver's License #: _____ State: _____

Social Security #: _____ - _____ - _____ (Will be blacked out after check)

Current Address:

Street City State Zip

Previous Address:

Street City State Zip

By signing below, I indicate that I have carefully read the foregoing release, know and understand the contents. I also acknowledge that all of the information I have provided is true and complete.

Signature: _____ Date: ____ / ____ / ____



LEGACY BIBLE CHURCH

LEGACY BIBLE CHURCH

4818 FM 691
Denison, TX 75020
903.892.1476
Fax: 903.892.1168

www.legacybiblechurch.org