SEVERNA PARK UNITED METHODIST CHURCH VOLUNTEER APPLICATION

Name (Please Print):				
Address: Street		City	State	ZIP
Daytime Phone:	Evening Phone:	Cell:		
Occupation:	Employer:			
Previous Volunteer Exper	ience:			
What qualities do you hav	e that would help you work wit	h children and/	or youth?	
	sical or other limitations that m _; NO If "yes", explain:_			
volunteering: Appalachiar Cub Scouts; Cribbery_	or youth programs at Severna Pa a Service Project; Boy Scou ; Music Ministries; Sund ; Youth Fellowship; Other_	ts; Girl Scot ay School;	uts; Vacation Bib	le School;
felony (included but not li	ed, convicted of, or pled guilty mited to drug-related charges, clations)? No; Yes If "Yes	hild abuse, other	er crimes of v	violence,
Have you ever been expos	ed to an incident of child abuse	or neglect? No	; Yes	
If ves, please explain:				

References: Please list three personal references (people who are not related to you by blood or marriage) and provide an accurate email address for each. We will contact each one. References are confidential. I authorize the SPUMC to contact these references to obtain information that is relevant to the volunteer position(s) for which I have applied. 1. Reference Name a. Reference Email address b. Your relationship to reference c. Length of time you have known reference 2. Reference Name a. Reference Email address _____ b. Your relationship to reference_____ c. Length of time you have known reference_____ 3. Reference Name _____ a. Reference Email address _____ b. Your relationship to reference c. Length of time you have known reference_____ PARTICIPATION COVENANT STATEMENT The congregation of Severna Park United Methodist Church is committed to providing a safe and secure environment for all children, youth, volunteers and staff who participate in ministries and activities sponsored by the church. Our Safe Sanctuaries Child Abuse and Prevention Policy and Procedures reflect our congregation's commitment to preserving this Church as a holy place of safety and protection for all who enter and as a place in which all people can experience the love of God through relationships with others. No adult who has been convicted of any form of child abuse should volunteer to work with children or youth in any church-sponsored activity. By signing this Participation Covenant, I agree to observe and abide by the policies set forth therein and in the SPUMC's Safe Sanctuaries Child Abuse Prevention Policy and Procedures. I acknowledge receipt of the Safe Sanctuaries Child Abuse Prevention Policy and Procedures. Print full name Signature Date If an individual is under age 18, a parent or guardian must also sign below. Print full name Signature Date

Address: Phone No.:

Email: