



Volunteer Application

Confidential

...Serve the Lord your God
with all your heart
and with all your soul.
- Deut. 10:12

Santa Cruz Bible Church
440 Frederick Street
Santa Cruz, CA 95062 831-429-1162

Name: _____

Address: _____

City: _____ ZIP _____

Phone: Home: _____

Work: _____

Email: _____

How long at this address? _____

Birth Date: _____

Social Security # _____

Driver's License # _____ State _____

Are you known by another name? _____

Occupation: _____

Marital Status: Single Married Widowed Divorced Separated

Spouse's Name: _____

Children's Names & Ages _____

When did you start attending SCBC? _____

Are you a member? Y N Date Joined: _____

Previous Church, if any, if at SCBC less than one year.

Dates Attended _____

I am interested in serving: (check all that apply)

- Small Group Participant
- Small Group Leader
- Family Discipleship Class Support Team
- Small Group Coach / Medium Group Leader
- Family Mentor
- Community Leader

In which ministries have you previously served? _____

Have you ever been arrested for or convicted of any of the following criminal offenses? (circle any that apply) No
Child Abuse Child Molestation/Rape Assault/Battery
Harassment Any other sex-related crimes
If you circled any of the above offences, please give the date, place, nature and current status of the offense.

- I would like to speak with a Pastor concerning these questions.
- I would like notification of the result of the Megan's Law Check.

Authorization

I am giving my authorization to Santa Cruz Bible Church and their appointed to verify the information on this form. The church may contact my references and appropriate government agencies, including permission to obtain a criminal check.

Signature _____ Date _____

See Reverse



References

Date Received: _____

Please list 4 references who are not related to you who have a definite knowledge of your character (*preferably a friend, employer, SCBC staff or member*). Please give a full name, phone number, address (including ZIP) and email.

1. Name _____
Address _____
City _____ ZIP _____
Phone _____
E-mail _____
Relationship to you _____

2. . Name _____
Address _____
City _____ ZIP _____
Phone _____
E-mail _____
Relationship to you _____

3. . Name _____
Address _____
City _____ ZIP _____
Phone _____
E-mail _____
Relationship to you _____

4. . Name _____
Address _____
City _____ ZIP _____
Phone _____
E-mail _____
Relationship to you _____

For Office Use Only

Staff: check off, date, and initial each step completed

- Pastoral / Staff Checks Emailed: _____
- Pastoral/ Staff Checks Complete: _____
- 2 Reference Checks Approved: _____
(note comments next to reference name)
- Name sent for Megan's Law Check: _____
- Megan's Law Check Complete: _____
- Recorded in Outlook (after assignment): _____

- Initial Interview

- Approved to serve
- Training (Vision, Safety, Procedures) _____
- Hour Serving: _____
- Age/Grade Serving : _____