



**Rejoice Lutheran Church**  
**0N377 N Mill Creek Drive**  
**Geneva, IL 60134**  
**Tel: 630.262.0596**

## VOLUNTEER APPLICATION

Last Name: First Name:	Social Security #:
Street Address:	Phone:
City, State Zip:	For what ages are you volunteering? <input type="checkbox"/> 18 or younger <input type="checkbox"/> 19-25 <input type="checkbox"/> 19-25
E-Mail Address:	

**What skills would you bring to the children's/youth program? .....**

.....

**What other children's/youth work experience do you have? (Please List)**

<u>Organization</u>	<u>Program</u>	<u>Dates</u>	<u>Contact</u>
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....



**Rejoice Lutheran Church**  
**ON377 N Mill Creek Drive**  
**Geneva, IL 60134**  
**Tel: 630.262.0596**

**Have you at any time ever been arrested for any reason?**  Yes  No

**Are you aware of having any traits or tendencies that could pose a threat to children, youth or others?**  Yes  No

**Are you aware of any reason why you should not work with children, youth or others?**  Yes  No

If the answer to any of these questions is “yes”, please explain in detail: .....

.....  
.....  
.....  
.....

..... Attach more pages as needed.

**What church or churches have you attended in the past five years?**

Church name	Pastor’s Name	Years Attended
.....	.....	.....
.....	.....	.....
.....	.....	.....

**References (other than relatives). Please provide at least two.**

Name/Relationship	Address	Phone
.....	.....	.....
.....	.....	.....
.....	.....	.....



**Rejoice Lutheran Church**  
**0N377 N Mill Creek Drive**  
**Geneva, IL 60134**  
**Tel: 630.262.0596**

Please read carefully before signing:

### **Volunteer Verification and Release**

I recognize that Rejoice is relying on the accuracy of the information I provide on the Volunteer Application form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.

I authorize the organization to contact any person or entity listed on the Volunteer Application form, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release the organization and any such person or entity listed on the Volunteer Application form from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.

I have carefully read the policy and procedures of the organization, and I agree to abide by them and to protect the health and safety of the children or youth assigned to my care or supervision at all times.

.....

APPLICANT SIGNATURE

DATE

.....

PRINT NAME