ST. PAUL LUTHERAN CHURCH TEENAGE WORKER APPLICATION

This form is to be completed by any teenage worker (paid or volunteer) who has the responsibility of working with, supervising, or caring for children, other youth, and/or dependent adults.

Name:		
Date of Birth:		
Present Address:		
City:	State:	Zip:
Home Phone Number:	E-ma	ail address:
School		Last Grade Completed
Please list all the states you have live	d in. Include the dates you	lived in each state.

Work Experience: Please list your current and previous employers (company name, position held and dates of employment).

Previous Volunteer Experience:_____

Personal References:

Name			
Address	City	State	Zip
Daytime Phone:	Evening Phone:		
Length of time you have known the reference:			
Relationship to reference:			
Name			
Address	City	State	Zip
Daytime Phone:	Evening Phone:		
Length of time you have known the reference:			
Relationship to reference:			
Name			
Address	City	State	_Zip
Daytime Phone:	Evening Phone:		
Length of time you have known the reference:			
Relationship to reference:			

Are you currently a member of St. Paul Lutheran Church? _____ How long have you been a member? _____

TEENAGE WORKER PARTICIPATION COVENANT STATEMENT

I understand that in serving as a volunteer or in a paid position for St. Paul Lutheran Church I am willing to abide by the policies and procedures of St. Paul Lutheran Church as presented in the Safe and Friendly Environment (SAFE) Policies and Procedures document. I understand that child abuse is a serious matter and I will do my part to provide a safe and friendly environment for children and youth at St. Paul Lutheran Church and will do my part to prevent child abuse while serving at St. Paul Lutheran Church.

Please answer the following questions:

- 2. As a volunteer in this congregation, do you agree to observe the "Two-Adult Rule" at all times? ☐ Yes ☐ No
- 3. As a volunteer in this congregation, do you agree to abide by the six-month rule before beginning a volunteer assignment? □ Yes □ No
- 4. As a volunteer in this congregation, do you agree to participate in training and education events provided by the church related to your volunteer assignment? □ Yes □ No
- 5. As a volunteer in this congregation, do you agree to promptly report abusive or inappropriate behavior to your supervisor? □ Yes □ No

I have read this **Participation Covenant**, and I agree to observe and abide by the policies set forth above.

Signature of Teenage Worker

I do not know of any reason why my child should not serve as a teenage worker. He/She does not demonstrate any signs of being a potential risk to the church or its members.

I give permission to St. Paul Lutheran Church to verify the information my child has provided on this application by contacting the references and employers listed, by conducting a criminal records check, or by other means, including others who have not been listed.

Signature of Parent or Guardian

Please return the completed application to:

Church Office St. Paul Lutheran Church 610 15th Street Ames, Iowa 50010 Date

Date