
Children's Ministries Volunteer Application For Adults (age 18 and older)

Dear Children's Ministries Volunteer Applicant,

Thank you for your interest in working with children at North Heights. We are excited about the potential to work side-by-side with you in ministry, and how God may use you to reach children for His Kingdom!

North Heights is committed to ensuring for the safety of all participants. In an effort to do this, all staff and volunteers who work with children, youth, and vulnerable adults are required to complete the attached "Permission to Obtain a Background Check" form. This form will need to be completed every three years. In Children's Ministries we also have a few additional questions that will help us determine your qualifications and placement, and we perform reference checks.

This form and all information gathered will be kept in a secure location, available to specified ministry leaders only.

The attached forms must be completed before volunteering in NHLC Children's Ministries.

Please complete the forms on the following two pages and return it to:

North Heights Lutheran Church
Children's Ministries
1700 West Highway 96
Arden Hills, MN 55112

If you have questions, please call 651-797-7822 or email Children@NHLC.org.

NHLC Children's Ministries Volunteer Application (Adult)

*This form must be completed before volunteering
within Children's Ministries at North Heights Lutheran Church.*

First Name _____ MI _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Date of Birth (Mo/Day/Yr) _____

Do you currently attend North Heights? Yes No If yes, for how long? _____

If no, what church do you currently attend? _____

Which program are you volunteering for?

- | | |
|--|--|
| <input type="checkbox"/> Sunday School | <input type="checkbox"/> Kid's Summer Ministries |
| <input type="checkbox"/> Kingdom Kids | <input type="checkbox"/> Special Needs |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Special Events |

At which North Heights campus will you be volunteering? Arden Hills Roseville 9:00 10:45

Do you have children in the program? Yes No

Special certification (i.e. CPR, Medical, etc.): _____

Previous volunteer experience (including working with children):

Why do you want to work with children?:

Describe your faith journey:

Have you ever been refused participation in any other children's or youth programs? Yes No

If yes, please explain: _____

Have you ever been convicted of a crime(s)? Yes No

If yes, please explain: _____

Many of us have had experiences in our past that may affect our ministry to others. If you feel there may be a conflict, or have not taken steps towards wholeness, we have resources that can help. Feel free to inquire about this, or check here if you would like us to connect you with those resources ____

Please complete the other side

6/1/2011

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Please list three ***non-related*** references who can tell about your work with children and/or your Christian character:

References (3 required)	
(1) Name:	
Email Address:	
Home Phone Number:	
Cell Phone Number:	
Number of Years Known:	Relationship to You:
(2) Name:	
Email Address:	
Home Phone Number:	
Cell Phone Number:	
Number of Years Known:	Relationship to You:
(3) Name:	
Email Address:	
Home Phone Number:	
Cell Phone Number:	
Number of Years Known:	Relationship to You:

Applicant Signature _____ Date _____

North Heights Lutheran Church Staff Use Only:		
Date	Initial	
_____	_____	1. Volunteer application filled out and turned in.
_____	_____	2. Ministry Position _____
_____	_____	3. Criminal background check completed.
_____	_____	4. Reference email sent or phone contact initiated.
_____	_____	5. References completed. (At least 2 should be returned.)
_____	_____	6. Application completed and communicated to ministry leader.

