

Ministry Application

for Ministries to Children, Youth, and Vulnerable Adults

Adult Version

(if you are under 18, please complete the Youth Version)

This application may be completed online at <http://queensway.org/app>

Thank you for your interest in ministry at Queensway Baptist Church! The purpose of this application is to get to know you better so we can partner with you as you discover how God has gifted you for service in the Kingdom of God. This information will be kept confidential and will only be shared with Queensway Baptist Church ministry personnel responsible for screening volunteers. *If you have already filled out this application in a previous year, you may fill out the abbreviated Renewal Application.*

Personal Information

Full Name: _____ Date of Birth: _____ / _____ / _____
M D Y

Address: _____ Email: _____

Home Phone: _____ Cell Phone: _____

Church Affiliation

What year did you start attending Queensway Baptist Church?
(if less than 1 year, include the month) _____

What churches other than Queensway Baptist Church have you attended in the last 5 years?

1) _____ Dates: _____

2) _____ Dates: _____

CPR/First Aid

Are you CPR/First Aid certified? No Yes Certification Level: _____ Cert. Date: _____

Ministry Experience

How have you been involved in any church ministry at any church in the last 5 years?

1) Position/Role: _____

Church: _____ Dates: _____

2) Position/Role: _____

Church: _____ Dates: _____

3) Position/Role: _____

Church: _____ Dates: _____

Education

Please list your education history:

1) School: _____ Degree/Diploma: _____ Dates: _____

2) School: _____ Degree/Diploma: _____ Dates: _____

Employment

Please list your employers for the last 5 years:

- 1) Title: _____ Company: _____ Dates: _____
2) Title: _____ Company: _____ Dates: _____
3) Title: _____ Company: _____ Dates: _____

Personal

Describe your spiritual journey and your relationship with Christ:

Why do you want to serve in the ministry/ministries you are applying for?

What talents, spiritual gifts, abilities, and/or passions do you possess that you feel could be used in a positive way within the ministry?

Please answer the following questions honestly. Saying “yes” to any of the following does not necessarily disqualify you from ministry, but we will need to discuss how you have been healed or restored.

Have you ever been convicted or found guilty of a criminal offence for which a pardon has not been granted? *(This does not include minor traffic violations)* Yes No

If yes, please list offence(s) and date(s) of conviction:

As an adult, have you ever engaged in sexual activity with a minor? Yes No

Have you ever been expelled or asked to step down from any ministry, employer, or organization for assault or violence against any person, or for assault, violence or impropriety with children, youth, or other vulnerable persons? Yes No

Have you been investigated by the Child Welfare Agency or any other organization for suspected child abuse? Yes No

Have you ever been a defendant or respondent in a civil lawsuit or human rights complaint or other legal proceedings in which you were alleged to have abused or engaged in violence, harassment or other immoral or illegal behaviour or conduct involving children, youth or vulnerable persons? Yes No

Do you have any health concerns which would impact your ability to work with children or youth, or contagious diseases that might be a hazard to others? Yes No

If yes, please describe your health concerns:

Is there anything else you would like us to know that would impact your role as a child/youth worker?

References

Please provide the names of three individuals (excluding relatives) who could provide a reference for you. Include at least one reference from outside Queensway Baptist Church. Ideal references have known you for at least a year, are able to identify your strengths and weaknesses, and can describe your background.

1) Name: _____ Relationship: _____

Email: _____ Phone: _____

2) Name: _____ Relationship: _____

Email: _____ Phone: _____

3) Name: _____ Relationship: _____

Email: _____ Phone: _____

Photo & Video

From time to time, QBC may wish to use photos and/or videos of you **without identifying information** on bulletin boards, the QBC website, flyers, the QBC Facebook page, etc. We do this to give a personal touch to our communication and to celebrate what God is doing in our ministry. If you wish to have photos and/or videos of you removed from public display, please contact the church.

- Yes**, QBC may use photos/videos of me *without identifying information*
- No**, QBC may not use photos of me

Police Check Requirement

For volunteers 18+ to serve in ministries to children, youth, and vulnerable adults we require a *police vulnerable sector police check* (PVSC). Go to <http://queensway.org/policecheck> for instructions.

Applicant's Statement

I declare by my signature below that the information contained in this application is true and accurate to the best of my recollection and knowledge. I further authorize Queensway Baptist Church to contact all references listed, and to verify all information through background checks if required.

When and if I am working in a ministry targeted to **children or youth**:

I commit to follow the expectations detailed in the [Conduct & Behaviour Expectations for Children & Youth Workers](#) document.

I commit to follow the expectations, policies, and guidelines of working with children at as detailed in the [Policies, Procedures, & Guidelines for Children & Youth Workers](#) document.

When and if I am working in a ministry targeted to **vulnerable adults**:

I commit to follow the expectations detailed in the [Policy for Ministries to Vulnerable Adults](#) document.

Signature: _____ Date: _____