

Volunteer Application

Complete both sides of this form and mail to Christian Learning Centers.



Page 1 of 2 (Please print clearly.)

PERSONAL INFORMATION			
Name			
Maiden Name			
Address			
City		State	Zip
☎ Home	Cell	Work	
Email			
Date of Birth		Social Security #	
Are there any health-related issues we should be aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:			
FOR DRIVER POSITION ONLY	Driver's License #		State
	Is your driver's license current and valid? <input type="checkbox"/> Yes <input type="checkbox"/> No		
EMERGENCY CONTACT			
Name		Relationship	
Contact's Address			
City		State	Zip
☎ Home	Cell	Work	
RELIGIOUS BACKGROUND			
Attending Church			
Address			
City		State	Zip
As a child, did you attend...	Sunday School	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Vacation Bible School	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Released-Time	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, where?		
Please write 2-3 sentence answers for each of these questions.			
How and when did you become a Christian?			
Briefly describe your present walk with the Lord.			
Why do you want to teach or assist in Released-Time?			
In which volunteer position would you like to serve?			
With which school would you like to serve?			

RELEVANT EXPERIENCE
Occupation
Retired? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, former occupation
Student? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list school and years of attendance
Highest Level of Education (list degrees earned)
Explain your Bible training. (List college, training at church or Christian ministries, Christian ministries training association, etc.)
If you currently work with children in your church or another organization, what is your responsibility?
Please list other experience you have in working with children.
Do you speak any languages other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what language(s):
REFERENCES
Please list two references (a personal and a business reference). Your references need to be people (not related to you) who have known you several years and can attest to your ability to relate to children.
Reference #1: Name/Address/Phone
Reference #2: Name/Address/Phone
Comments: (Use another sheet if necessary.)

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HISTORY	
Answering "yes" to these questions is not grounds for automatic rejection. More information may be requested from you before you can be considered as a volunteer.	
Have you ever been convicted of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted for the sale or use of controlled substances? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been charged, investigated or convicted of child neglect/abuse or domestic violence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever had your license suspended or driving privileges revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been dismissed from rendering service to children or youth for reason other than the expiration of the normal term of such service? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, give the name of the institution involved, its location, the name of the supervisor, and the time and nature of the circumstance under which you were dismissed.	
AGREEMENT	
I have read and understand the following documents found in the Volunteer Guide and/or on the CLC website:	
<ul style="list-style-type: none"> • CLC Statement of Belief <input type="checkbox"/> Yes <input type="checkbox"/> No • Expectations (Yours and Ours) <input type="checkbox"/> Yes <input type="checkbox"/> No • Appropriate and Inappropriate Behavior When Working w/Students <input type="checkbox"/> Yes <input type="checkbox"/> No 	
I have viewed and understand the child abuse prevention training video. <input type="checkbox"/> Yes <input type="checkbox"/> No	
I acknowledge my responsibility to be careful and conscientious in reporting any suspicions of child abuse to the Executive Director. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Applicant's Signature	Date
Applicant's Printed Name	
Witness's Signature	Date
Witness's Printed Name	
Witness's Address, City, State, Zip	
Application Received by	Date
Application Reviewed by	Date
<input type="checkbox"/> Accepted <input type="checkbox"/> Conditional <input type="checkbox"/> Rejected	Date

TERMS
As the applicant named and described herein, I DO HEREBY represent to Christian Learning Centers of Greenville County (CLC), with the understanding that the organization will rely upon the information provided in considering my application for work with minors, that the foregoing information and the following statements are true:
<ol style="list-style-type: none"> 1. In my prior volunteer work, I have never used another name or alias. 2. I am qualified to work with minors in the programs of CLC. 3. I have never been arrested as a result of a charge of child abuse or of actual or attempted sexual molestation of a minor (not including any arrest or charge that has been expunged). 4. I have never been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor. 5. I authorize CLC to request and obtain information concerning my current and previous employment and contact the references listed herein. 6. I authorize any of the churches or other organizations and their representatives and my personal references listed to give to CLC any information they may have regarding my character and fitness for work with minors. I release all such organizations and individuals from any liability that may result from their furnishing such information to CLC. I waive any right that I may have to inspect any records containing such information. 7. I am aware that CLC is a Christian organization, and in the event that my application is accepted, I agree that I will conduct myself in my work with minors in a manner that will be consistent with the policies and principles of the organization. 8. Having provided the foregoing information and having affirmed the foregoing statements are true, I recognize that any false information or statements are punishable under the laws relating to perjury. 9. If I am applying to become a volunteer driver, I authorize CLC to check my driving record. I understand that if my driving record is unsatisfactory, the CLC staff will notify me by letter, and I will not be able to serve as a driver for the organization.
Agreement to above (Applicant's Initials):
IN SIGNING THIS APPLICATION I UNDERSTAND THAT:
<ol style="list-style-type: none"> 1. I have read and fully understand all questions requested in this application. 2. I affirm that the information I have given on this application form is true, correct, and complete. I understand that any falsification of information herein, regardless of the time of discovery, constitutes cause for dismissal from the CLC program. 3. I understand that the completion and/or execution of the application does not ensure me a volunteer position, nor does it obligate the organization or me in any way. 4. I fully understand that the omission and/or misrepresentation of facts requested by CLC may be cause of immediate dismissal without prior notice. 5. I understand it is necessary that records and criminal background or reference checks on me could be conducted at any time during the application process or during my volunteer service with CLC. 6. I agree to provide/release information as requested for records and criminal history checks (e.g., court, police, child abuse registry, national criminal investigation clearinghouse, Department of Children and Family Services, Division of Motor Vehicles, etc.). 7. I understand that this appointment with CLC is subject to annual review. 8. I understand that I must refrain from speaking to news or media representatives regarding the Released-Time program without the assistance of the Executive Director. 9. I have read and understand the above information, and I agree to the terms and duties specified for the volunteers of CLC.
Agreement to above (Applicant's Initials):
I agree that my photo may be used by the media or submitted for the organization's newsletter, website or other publications of CLC. <input type="checkbox"/> Yes <input type="checkbox"/> No

Note: Information released to CLC of Greenville County will be treated as confidential material that is the property of the organization and handled in accordance with CLC policy on access to records.

Send completed application in a sealed envelope marked "Confidential" to Christian Learning Centers, PO Box 26824, Greenville, SC 29616.