



Volunteer Application

To be Completed with Background Check Authorization

Name _____ Date: ____/____/____

Address: _____

City _____ State _____ Zip _____ Dates? _____

Previous Address: _____

City _____ State _____ Zip _____ Dates? _____

Mobile Phone: (____)____-____ Home Phone: (____)____-____

E-mail _____

Position desired: _____ Date available to start: _____

What hours and days are you available to volunteer? _____

Are you legally eligible to work in the United States? Yes No
(Proof of eligibility will be required upon offer of employment)

Are you over the age of 18? Yes No
(If no, you may be required to provide authorization from a parent or guardian)

Have you ever applied to, or worked for, Eagle LifeChurch before?
If yes, please give date: _____ Yes No



Educational Background

	Name/Location of School	Year Graduated	Degree	Areas of Concentration
High School				
College				
Other				

Employment History

(Please begin with most recent)

Employment Date (s)	Employer & Supervisor's Name	Address & Telephone Number	Job Title & Primary Responsibilities	Reason for Leaving

May we contact the employers listed above? Yes No

Please list any additional education, training, or skills that qualify you for the position to which you are applying

Have you ever been convicted of a criminal offense (felony or misdemeanor, except for minor traffic violations), including convictions based on a plea of guilty or no contest? Yes* No

*If “yes,” please explain, including the nature of the offense, date, court location, and other information that would be helpful to us in considering your application.

Church Activity

Please list the churches you have attended over the past five years.

Church Name	Address/Location	Telephone Number	Date(s) Attended

References

Please list three references (not related to you) that we may contact.

Name	Address and Telephone Number	Years Known/Relationship

Please provide any other information that you feel will help us in considering your application for employment:

Non-Discrimination Statement

Eagle LifeChurch does not discriminate against job applicants or employees on the basis of race, color, national origin, gender, disability, age, or veteran status.

Employment at Will

Volunteering with Eagle LifeChurch is "at will" and not by contract either express or implied. This means that both you and the church are free to terminate the relationship at any time and for any legal reason.

Certification and Release

By signing this application, I certify that all the information I have provided is true and accurate to the best of my knowledge, and understand that misleading or false statements on this application is justification to end my ability to volunteer.

I hereby give Eagle LifeChurch permission to contact my previous or current employers, references, schools, and others concerning the statements in this application, and I hereby release all parties involved from any liability as a result of such contact.

I understand that if offered a position with Eagle LifeChurch, I may be required to submit to a pre-volunteering medical examination, drug screening, and/or criminal background check as a condition of my service. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to effect the results of these tests or checks will result in withdrawal of an offer to serve.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD, AND AGREE TO THE ABOVE STATEMENTS.

Signature: _____ Date: ____/____/____

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

Consumer and/or Criminal Background Investigation

In connection with my application for employment or to serve as a volunteer with **Eagle LifeChurch** (“the Church”), I understand that a “consumer report” and/or “investigative consumer report”, as defined by the Fair Credit Reporting Act, will be requested by the Church for employment or volunteer purposes, whichever is applicable, from Protect My Ministry, Inc., (“Protect My Ministry”), a consumer reporting agency as defined by the Fair Credit Reporting Act. These reports may include information as to my character, general reputation, personal characteristics or mode of living, whichever are applicable. They may involve interviews with sources such as my neighbors, friends or associates. The report may also contain information about me relating to my criminal history, credit history, driving and/or motor vehicle records, social security number verification, verification of education or employment history, worker’s compensation (only after a conditional job offer) or other background checks. Such reports may be obtained at any time after receipt of this Disclosure and Authorization and if I am hired or serve as a volunteer, whichever is applicable, throughout the course of my employment or volunteer service, as permitted by law and unless revoked by me in writing. I understand that I have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to Protect My Ministry, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581. For information about Protect My Ministry’s privacy practices, see www.protectmyministry.com.

Acknowledgement and Authorization

By signing below, I voluntarily and knowingly authorize the Church or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I acknowledge receipt of a copy of *A Summary of Your Rights under the Fair Credit Reporting Act* and certify that I have read this Disclosure and Authorization as well as the summary explaining my rights under the Fair Credit Reporting Act

Signature TODAY’S DATE _____

NAME:
 LAST _____ FIRST _____ MIDDLE _____

Other Names Used (example: Maiden) _____

STREET ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

Social Security Number *Driver’s License or STATE ID* *STATE ISSUED*

EMAIL ADDRESS _____

For identification purposes only, please provide FULL DOB: ____ / ____ / ____

Protect My Ministry, Inc.
 14499 Dale Mabry Hwy, Ste 201 South
 Tampa, FL 33618
 Phone: 800-319-5581 Fax: 800-319-5582
www.protectmyministry.com