

Personal Information

Name:	Date of Birth:	School (11	applicable):	Gender:	
Address:		Cell Phone:			
Alternate Phone:	ternate Phone: Email:				
References					
References must be adults who application that they may be co		icant. Please infor	m your references after co	mpleting the	
Reference 1 Name:	Ema	il:	Phone #:		
eference 2 Name: Email: _		il:	Phone #:		
Church Activity					
Name of the church you currently attend:			Denomination:		
Pastor/Youth Pastor:	Email: _		Phone:		
Pastor/Youth Pastor:		_ Email:	Phone:		
List any Christian/community of	organizations with which y	ou are PRESENT	LY associated:		
Evnavious Tusining and					
Experience, Training, and A		. / 1. 1. /		.1.00	
Please list any skills/interests th	nat you feel would be relev	ant/applicable/bei	neficial to volunteering wi	th The Foundry.	
Why You Want to Serve					
Please give a brief explanation	of why you want to serve	at The Foundry.			



Please give us an idea of when and how often you might like to volunteer. For example, would you like to serve for one week during summer camp, or maybe you want to volunteer one Wednesday each month, or maybe you are interested in serving twice a week with our afterschool?

Voluntary Disclosure Agreement

If you are a person who answers affirmatively to any of the questions below, we may discuss this further with you during your connection process. Due to the nature of our work and federal and state licensing requirements, there are some offenses that may preclude service at The Foundry. Potential volunteers are subject to criminal and child abuse and neglect checks and must successfully pass screening in order to serve at The Foundry.

1)	Have you ever been concerned that you may have an addiction to drugs, alcohol, pornography or any other substance, or has anyone ever suggested that you may have a problem with an addiction?NoYes		
	If yes, explain		
2)	Have you ever been arrested, convicted or pleaded guilty of a crime? NoYes		
	If yes, explain		
3)	Have you ever been accused, charged, alleged to have or have committed any act of neglecting, abusing, molesting or battering any child or adult? NoYes		
	If yes, explain		
4)	Have you ever been treated for psychiatric disorder? NoYes		
	If yes, explain		
5)	Is there any circumstance or pattern in your life which would make it inappropriate for you to serve with minors or would compromise the integrity of The Foundry? NoYes		
	If yes, explain		
	stand that The Foundry has the right to deny volunteerism opportunities based on the screening process and ound checks and any other relevant factors deemed important to the safety and well-being of the children in our		
Applic	ants Signature: Date:		
Parent/	Guardian Signature (if applicable):		