

MINISTRY LEADERS APPLICATION FORM

All information recorded in this application is confidential

This application must be completed by all applicants applying for any position in programs involving activities with children or young people.

Full name of applicant			
Previous name (if applicable)			
Date of birth (if under 18 years)			
Address			
Contacts	Home		
	Work		
	Mobile		
	Email		

Church Attendance	Years	Months
Length of time at this church		
Previous churches attended in the past 5 years (Specify)		

What type of ministry would you like to be involved in?	
Previous experience in children's or youth ministry	
Previous training in children's or youth ministry	

Have you ever been the subject of any allegations or complaints concerning or involving misconduct with children or adults? (<i>circle appropriate response</i>)	Yes	No
If yes, please provide details:		

Is there anything about your past conduct or behaviour which would call into question your suitability to be entrusted with the care of young people or children? (<i>circle appropriate response</i>)	Yes	No
If yes, please provide details:		

Have you ever been charged with, or convicted of, a criminal offence, or been the subject of any court-issued restraining order? (<i>circle appropriate response</i>)	Yes	No
If yes, in a separate signed attachment please provide full details, including date of offence[s]/arrest; nature of offence[s] /alleged offence[s]; date of conviction; place of conviction and sentence imposed; date and terms of court order.		
Please provide the following details of persons able to act as referees		
1. Name Address Contact details		
2. Name Address Contact details		
3. Name Address Contact details		

Declaration

I confirm that the information I have supplied on this form is true and correct to the best of my knowledge.

I understand that, should it be found that any answer is untrue, I may be dismissed from my position[s] with the Church.

I agree that the [Senior Church Leader](#) or their delegate may contact the referees mentioned in this application, and any other person whose knowledge of me may assist the Church to determine my suitability for appointment, and that a copy of this application may be sent to any referee listed above.

I have read and agree to follow the Diocesan *Safe Communities of Faith Policy, Diocesan Code of Good Practice*.

Signature _____ Witnessed by _____

Name _____ Name _____

Date _____ Date _____