# Staff Application

Alaska Ministry Network

In order to provide the safest possible environment in which our children and youth can experience God, all workers attending or assisting at any Alaska Ministry Network camps involving minors must be screened. A complete application, described below, must be on file 2 weeks before the event. If you have lived outside the United States, a longer processing time is required, up to a month.

Please note that Parts 1, 2, and 4 of this application must be received by the Alaska Ministry Network office at least 2 weeks prior to the event. If the application is received after the two week deadline, there is no guarantee that the forms will be processed in time for the event. In order to be processed, \$25 must be sent with this form to pay for the criminal records check.

- 1. The first section entitled "Staff Application | Part 1" must be filled out for every staff person and turned into our office.
- 2. The second section entitled "Staff Application | Part 2" must be signed by your pastor and included with "Staff Application | Part 1" to show that your church has done their due diligence to properly screen you.
- 3. The third section entitled "Volunteer Screening Form | Part 3" is to be completed only by applicants who do not have a written application on file at their local church. This is to be retained by your church.
- 4. The fourth section entitled "Staff Application | Part 4" is to be completed and turned in to our office with Part 1 and 2. This is an authorization to run a criminal records check, which is required for all camp workers. This part of the application is not necessary for workers who are minors.

If you have any questions please contact us at:

Youth Ministry | Ryan Gluth

Call: 907-747-5848 Email: ryan@alaskaag.org

Children's Ministry | Pam Hodges

Call: 907-952-4618

Email: pastorpam7@gmail.com

Royal Rangers | Chuck Niemann

Call: 907-952-2905 Email: chuxn@gci.net

Camp AN | Jim Schulz

Call: 907-278-4567

Email: jimschulzalaska@gmail.com

# **Staff Application | Part 1**

Alaska Ministry Network

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors in any scheduled program or activity of the Alaska Ministry Network of the Assemblies of God. It is being used to help provide a safe and secure environment for those children and youth who participate in scheduled children's and youth activities of the Alaska Ministry Network of the Assemblies of God.

Please note that no smoking, alcohol, or recreational drug use is permitted at any Alaska Ministry Network event.

PERSONAL						
Data						
Date:						
Present Address:						
	Number	Street Age: _		City Fmail:	State	Zip
Which event are you i		_				
Have you ever been c						
(attach a separate pag						
(	<b>,</b>					
CHURCH HISTORY A	AND PRIOR YO	UTH/CHILDREN'	S WORK			
Name of Church You	Dogularly Attono	1				
	9					
Address:	Number	Street		City	State	Zip
Church Phone Number	er					
List other churches yo performed; (Attach a			the past 5 yea	rs and the type	of all previous w	ork you
	Churc	h 1	Church	2	Church 3	3
Church Name						
Address						
City						
State   Zin						
State   Zip						
Phone #						
Type of work						
performed						

## **Volunteer Screening | Part 2**

**Church Leader Certification** 

### CHURCH LEADER CERTIFICATION

Because of the large number of applicants, great reliance is placed on the certification of each applicant's pastor that there are no facts or allegations that raise any question concerning an applicant's suitability for working with minors. It is also important that the local church has screened each applicant with a process including an application, reference check, and interview. When checking references, call organizational references such as churches, youth organizations, or other individuals who have observed the person working with minors.

#### I certify that:

Our church has completed two references checks on this worker, and the documentation is on file at the church. In addition, I, or another church representative, have completed an interview with the worker to determine their suitability to work with minors. Based upon the application, reference checks, interview, and any knowledge I may have, I know of no reason why this individual should not work with minors.

Legible Signature	
Printed Name	
Pastoral Staff Member	
Advisory Board Member	
Senior Pastor	
(check one)	

# **Volunteer Screening Form | Part 3**

To Be Retained by the Local Church

## **CONFIDENTIAL**

This application is to be completed by all applicants for any position (volunteer or compensated). This is not an employment form. Persons seeking a position in the church or as a paid employee will be required to complete an employment application in addition to this screening form. This form is being used to help the church and/or Alaska District of the Assemblies of God provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

PERSONAL						
Date:						
Present Address:						
	Number	Street		City	State	Zip
Home Phone: ( ) _		Age:				
Have you ever been	convicted of or pleade	d guilty to a crir	ne? Yes	No	. If yes, please e	xplain
(attach a separate pa	ige,if necessary):					
CHURCH HISTORY	AND PRIOR YOUTH	CHILDREN'S V	VORK			
Name of Church Reg	ularly Attend					
Address:						
Church Dhone Numb		Street		City	State	Zip
Church Phone Numb	er					
	ou have attended regu		past 5 years	and the type	e of all previous w	ork you
performed; (Attach a	separate sheet if nec	essary.)				
	Church 1		Church 2		Church 3	<u> </u>
Church Name						
Address						
City						
State   Zip						
Phone #						
Type of work						
performed						
ponomica						

List all previous non-church work involving children or youth:

	Organization	Organization 2	Organization 3
Name	Organization	Organization 2	Organization 3
Address			
City			
State   Zip			
Phone #			
Type of work performed			
Dates			
List any gifts, callings,	training, education, or other	factors that have prepared you	for children or youth work:

PERSONAL REFER	NCES   Not former employers or re	latives		
REFERENCE <b>ONE</b>				
Name	Last			
	Last		Ant#	
-	V		•	
REFERENCE <b>TWO</b>				
NameFirst				
	Last		Apt #	
-	V		-	
Applicant's Stateme	ht .			
references or church regarding my charact application, I hereby r or any other person of all liability for damag account of compliance	on contained in this application is consisted in this application to give any and fitness for children or youth worklease any individual, church, youth or organization, including record custors of whatever kind or nature which error any attempts to comply, with the provided about me by any person or	y information (including k. In consideration of the ganization, charity, emplidians, both collectively may at any time result is authorization. I waive	opinions) that they may have e receipt and evaluation of this loyer, reference, district, camp, and individually, from any and to me, my heirs, or family, on e any right that I may have to	
Should my application be accepted, I agree to be bound by the Bylaws and policies of the church/Network and to refrain from unscriptural conduct in the performance of my service on behalf of the church/Network.				
I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.				
Applicant's Signature		Date		

# Staff Application | Part 4 Alaska Ministry Network

## **AUTHORIZATION AND REQUEST FOR CRIMINAL RECORDS VERIFICATION**

I,	formation regarding any record of charges or tained on me, whether said file is a local, state, or d convictions for crimes committed against minors, to al law. I do release said entities from all liability that his request. I may revoke this request at any time, but of same.
Name as it appears on Driver's License(Last):  Address:	
Other Names used by Applicant (If any):  Date of Birth:  Place of Birth:  Social Security Number:  Application will not be processed until payme	
For Office Use Only  Part 1 Complete: Y/N  Part 2 Complete: Y/N  Part 4 Complete: Y/N	Criminal Records Check Ran: Y/N Application Approved/Denied Payment Received: \$ Online OR Check #