

CHILDREN'S MINISTRY APPLICATION

Serving Post being applied for:

Post: _____

Personal and Contact Details:

Full Name: _____

Previous Names* (e.g. maiden name): _____

Current Address: _____

_____ Postcode: _____

How long have you lived at the above address? _____ Years _____ Months

Email: _____

Landline: _____ Mobile: _____

If you have lived at the address above for less than 3 years, please give previous addresses for this period:

From: _____ To: _____ From: _____ To: _____

Postcode: _____ Postcode: _____

From: _____ To: _____ From: _____ To: _____

Postcode: _____ Postcode: _____

* If applicable

Experience and Skills:

How long have you been a Christian? _____

If you have been at *Falkirk Vineyard Church* for less than 2 years, please provide details of what church you previously attended (if any):

Please give details of previous experience of working with children or young people. Include any relevant qualifications or training, either in a voluntary or paid capacity.

Have you at any time been restricted from working with children or young people by any organisation? Yes No If 'yes' we may contact you for further information.

Reference:

For this post you are asked to provide the name of another member of this church who knows you well and can say you are suitable for the position (ideally, though not necessarily, a Small Group leader). Please give their name below and either send them the Recommendation Form from that once completed needs emailing to kids@falkirkvineyard.com

Name: _____

Protecting Vulnerable Groups service:

Owing to the nature of the duties an enhanced disclosure with barring record would be required from the Protecting Vulnerable Groups Disclosure Service. In applying for this post you agree to providing information required to obtain this record and the record being made available to Falkirk Vineyard Church.

Please confirm you agree: I agree

Declaration:

I confirm that the information given is correct and complete. I have read the Falkirk Vineyard Safeguarding Policy Statement Guidelines and Procedures.

Signature: _____

Date: _____