

Background Check

1. Have you ever been convicted of, or pled guilty to, or are charges pending concerning any crime or misdemeanor or involving actual or attempted child abuse, neglect or molestation? If yes please explain (attach a separate sheet of paper if necessary).
 Yes No Let's Talk
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2. Have you ever been charged with a sexual offense or an offense relating to children involving a crime of violence? If yes, please explain (attach a separate sheet of paper if necessary).
 Yes No Let's Talk
-

3. Have you ever been convicted of, or pled guilty to, or are there charges pending concerning any other crime? If yes, please explain (attach a separate sheet of paper if necessary). Note: Conviction of a crime that does not involve any risk to children or youth is not an automatic exclusion to volunteer service.
 Yes No Let's Talk
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4. Were you a victim of abuse or molestation while a minor? (If you prefer, you may discuss your answer in confidence rather than answering it on this form. Answering yes or failure to answer will not automatically disqualify a candidate).
 Yes No Let's Talk
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5. Have you at any time during the past five years used illegal drugs or other illegal controlled substances?
 Yes No Let's Talk
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6. Have you ever participated in the creation, dissemination, or transmission of pornography or pornographic materials of any type?
 Yes No Let's Talk
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7. Is there any other information that might be relevant to accessing your fitness for working with children? If yes, please provide the following information on a separate sheet if necessary.
 Yes No Let's Talk

Church Activity

How long have you attended LMCC?

List the last church you attended. Please include phone number and contact person.

List previous work (church or non-church) involving children or youth.

Do you have other skills you wish to mention?

References

Please provide at least two character references (no relatives please) and two professional (work related) references that we may contact.

1. Name _____ Phone (____)_____

Address _____

Relationship to You _____

2. Name _____ Phone (____)_____

Address _____

Relationship to You _____

3. Name _____ Phone (____)_____

Address _____

Relationship to You _____

4. Name _____ Phone (____)_____

Address _____

Relationship to You _____

**VOLUNTEER
SCREENING FORM**

**Lookout Mountain
Community Church**

Candidate Statement

Please read carefully before signing.

I hereby authorize you to contact any references or organizations listed in this application to release any information contained in their files or records concerning me. In consideration of the receipt and evaluation of this form by Lookout Mountain Community Church, I release LMCC and all of its agents, and all such references and organizations from any liability or any damage that may result to me or my family on account of compliance with this authorization.

I understand and agree that it is critical to the mission and ministry of LMCC that all volunteers conform to the highest standards of safety, interpersonal conduct and sexual morality.

I have carefully read, understand and agree to the foregoing "candidate statement" and further understand that this is a legally binding agreement.

Signature of Candidate

Date