



CONFIDENTIAL
West Side Kids Screening Form

**West Side Church of God
7925 W. Bethany Home Road
Glendale, AZ 85307**

This application is to be completed by all applicants for any position involving the supervision of minors. It is being used to help the church provide a safe and secure environment for those children who participate in our programs and use our facilities. It will be required that each applicant go through a mandatory criminal background check before beginning this ministry.

Date _____

Social Security Number _____(Used for background check with written permission)

Name _____
Last First Middle

Present address _____

City _____ Zip _____ Date of Birth _____

Home phone () _____ Marital Status _____

Are you a born again believer? _____ When? _____

How long have you been attending West Side? _____

Please indicate the date you would be available to begin or the date you began teaching: _____

Do you currently attend a small group? YES NO If yes, which one? _____

What service do you regularly attend on Sunday mornings? 8:30 am 10:00 am 11:30 am

Are you a parent? YES NO

If yes, list your children's names and ages below.

Have you ever been accused, arrested or convicted of child abuse or a crime involving actual or attempted sexual abuse?

YES NO

If yes, please explain. Attach a separate page, if necessary.

Church History and Prior Youth Work

List (name and address) other churches you have attended regularly during the past five years:

List all previous church work involving children: (list each church's name and address, type of work performed, and dates)

List all previous non-church work involving children: (list each organization's name and address, type of work performed, and dates)

List any gifts, callings, training, education, or other factors that have prepared you for working with children:

What age groups are you interested in working with or currently working with?

- | | |
|---|--|
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Two's and Three's |
| <input type="checkbox"/> Four's and Five's/Kindergarten | <input type="checkbox"/> 1 st and 2 nd grade |
| <input type="checkbox"/> 3 rd and 4 th Grade | <input type="checkbox"/> 5 th and 6 th grade |
| <input type="checkbox"/> Kid's Kreation – 1 st through 6 th grade | <input type="checkbox"/> West Side Kids Club (Wednesday nights) |
| <input type="checkbox"/> Seasonal Helper (ex. VBS) | <input type="checkbox"/> Substitute |

Which services are you interested in working with or currently working with?

- | | |
|---|---|
| <input type="checkbox"/> Sunday, 8:30 AM | <input type="checkbox"/> Sunday, 10:00 AM |
| <input type="checkbox"/> Sunday, 11:30 AM | <input type="checkbox"/> Wednesday, 6:30 PM |

Are you willing to substitute for other teachers?

- YES NO

Personal References

- Please do not list relatives.
- Please include at least one person who does not attend this church.

Name _____

Address _____

Phone # _____

Name _____

Address _____

Phone # _____