

Children's Church

Nursery

Youth Group 6<sup>th</sup>-12<sup>th</sup>

Bus Driver

Or All Areas

Please check all that Apply

COWBOY FELLOWSHIP OF ATASCOSA COUNTY

P.O. Box 68
Pleasanton, TX 78064
(830)769-3733

VOLUNTEER BACKGROUND CHECK

I hereby authorize Cowboy Fellowship of Atascosa County, to obtain any criminal history record information relevant to volunteer work from any pertinent source. I further authorize any law enforcement agency, including, but not limited to, any police department or the Department of Public Safety as well as the Texas Department of Corrections, to furnish Cowboy Fellowship of Atascosa County, any such record.

Please Check what Ministry are you volunteering for:

\_\_ Nursery \_\_ VBS \_\_ Youth \_\_ BYBC \_\_ Bus \_\_ Other (\_\_\_\_\_)

Please complete the following information required by the reporting agencies:

Legal Name (First, Middle, Last)

Other names used (married, maiden, alias, etc. - First, Middle, Last)

Gender: \_\_\_\_\_ Race: \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_/\_\_\_/\_\_\_

Social Security Number: \_\_\_ - \_\_\_ - \_\_\_

Driver's License Number and State: \_\_\_\_\_

List all cities in Texas where there has been residency.

Signature of Volunteer Date: \_\_\_/\_\_\_/\_\_\_

Email Address

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Volunteer Application Form – Confidential

The congregation of Cowboy Fellowship of Atascosa County believes that ministering to children entails extraordinary responsibility. This Volunteer Application Form asks you to answer questions which are intended to reduce the potential risks of abuse to children, workers, and the church. Since answers to these questions are personal and sensitive, access to this form will be limited to our Nursery Committee chairs and supervisory church staff members.

None of your answers to these questions will automatically disqualify you from serving as a volunteer. If you prefer to discuss this part of your application in a verbal interview, please contact Terri Dumas at 830-569-4258.

Full Legal Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Addresses of where you have lived the last six (6) years:
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Place of Birth: \_\_\_\_\_

Has your driver's license ever been suspended or revoked? Yes \_\_\_ No \_\_\_

If yes, please explain: \_\_\_\_\_
\_\_\_\_\_

Have you ever been arrested? Yes \_\_\_ No \_\_\_

If yes, please explain: \_\_\_\_\_
\_\_\_\_\_

(continued on back)

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Have you ever been convicted of, pleaded guilty to, or are you currently charged with assault, abuse, neglect, or sexual molestation of a minor? Yes \_\_\_ No \_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other than the above, is there any fact or circumstance involving you or your background that would affect your ability to supervise, guide, or care for children? (For example, were you neglected or abused as a child? Do you have problems with substance or alcohol abuse?)

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List a reference from either a church where you recently served as a volunteer or another organization where you recently worked with children.

Reference's Name: \_\_\_\_\_

Church or Organization's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

The information contained in this application is correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_