



Temple Christian School
6824 Randol Mill Road
Fort Worth, Texas 76120
(817) 457-0770



Child Safety Application for Volunteers and Employees

CONFIDENTIAL

This application should be completed by all applicants for any position (volunteer or employment) involving the supervision of minor children. This is not an employment application. The purpose of this form is to assist in the creation of a safe environment for children, and students who participate in the programs of Temple Christian School or use Temple Ministries' facilities.

Date: _____

Full Legal Name: _____

First, Middle and Last name

Address: _____

Email: _____

Phone: _____

Drivers License # _____ Social Security # _____ - _____ - _____

Sex: _____ M _____ F Date of Birth: _____

Marital Status: _____ (*single, married, separated, divorced, widowed, etc.*)

How long have you been affiliated with Temple Christian School? _____

How long have you lived at your current address? _____

Previous address: _____

List all other cities and states where you have lived as an adult:

Please list the name, address, city and state of the churches you have attended regularly during the past 10 years: _____

Please list *all previous school or church work* involving children, and students. (List each institution's name and address, type of work carried out, dates, and a **contact person** familiar with your work there. **Use back of this page for more space, if necessary.**)

Please list *all previous non-church work* involving children, students or vulnerable populations. (List each organization's name and address, type of work carried out, dates and a **contact person** familiar with your work there.) _____

List any talents, vocations, preparation, training or other experiences which have equipped you to work with children, students: _____

Please complete a separate reference form providing one professional reference (if applicable), one personal reference, and one family member. References must include one non-family member and one member of the opposite sex. Please contact these references and inform them an authorized Temple Christian School staff person will be contacting them. (**See Child Safety Reference Form** attached. References supplied on an Employment Application may take the place of this form for applicants seeking *employment* with Temple Christian School.)

Because our school cares for our staff, faculty, volunteers and our children, and desires to protect them, please answer the following questions. We understand that the answers to these questions may be private and deeply personal. We will protect your privacy.

Why do you want to work with children at Temple Christian School?

Do you have a preference concerning the age group or sex of children or students with whom you would like to work? Why? _____

What is your philosophy concerning re-direction or discipline of children?

When you are unhappy, angry or emotional about a person or circumstance, what do you do?

Have you experienced any significant physical or emotional stresses within the past year, such as the loss of a parent, spouse, or child, extreme ill health, or any emotional or physical crisis? If so, please briefly explain. (Use back of page if necessary.)

Do you consider yourself to have been physically or sexually abused as a child? (This information will be kept entirely confidential.) _____

If you were physically or sexually abused as a child, would you consider utilizing church resources to seek healing in this area of your life?

Have you ever physically or sexually abused a child?

Has someone ever accused you of abusing a child?

RELEASE

I authorize Temple Christian School to contact all individuals, organizations and references listed on this **ChildSafety Application** in order to verify the information I have provided to the school. I agree to release from liability any person or organization that provides information concerning me, including those persons I have listed as references, as well as contact persons from my previous school and non-school work, listed on this application.

I specifically authorize Temple Christian School to undertake a consumer or investigative consumer report concerning my past.

I understand and agree that any information received from the background check and application verification will not be disclosed to me, and I hereby waive any right I may have to inspect any information provided about me by any person or organization identified by me on this form.

By signing this form, I certify and affirm that the information I have given on this form is true, complete and correct in all respects.

Name (printed):

Signature:

Date:



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Child Safety Code of Conduct

Please initial each of the following statements:

- _____ I declare that all statements contained in my Child Safety Application are true. I understand that any misrepresentation or omission is cause for dismissal.
- _____ I understand that **my references and contacts** from work with children, students, or disabled adults may be contacted and that an appropriate **criminal background check** will be conducted. I authorize investigations of all statements contained in this application. I specifically authorize Temple Christian School to undertake a criminal background check of my past.
- _____ I understand that I can withdraw from the application process at any time.
- _____ I understand that Temple Christian School has a policy of ZERO TOLERANCE FOR ABUSE and takes all allegations of abuse seriously. I further understand that Temple Ministries cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of any kind is grounds for immediate dismissal from my employment and possible criminal charges.
- _____ I declare that I am not a pedophile or child molester. I have not perpetrated physical abuse, sexual abuse, emotional abuse or neglect against a child, a student or a disabled adult, and I have never been accused of these acts.
- _____ I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of this application for employment, and that refusal to inform Temple Christian School of the contents of a sealed criminal record will result in the automatic denial of the application.
- _____ If employed, I agree to read and abide by all Policies and Procedures provided to me by the Temple Christian School.

Signature: _____ Date: _____

For Office Use Only:

I have reviewed this application and have noted any missing information.

Safety Team Member Signature: _____ Date: _____



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Child Safety Reference Form

Name of Applicant: _____ Date: _____

Name of Reference: _____

1. How long have you known this applicant? _____

2. What is your relationship to the applicant? _____

3. What strengths and weaknesses have you observed in this applicant?

4. How would you rate applicant's ability to work with and relate to children?

_____ Above satisfactory _____ Satisfactory _____ Below satisfactory

Can you give me an example of how the applicant relates to children?

5. We are looking for someone who can stay calm and control frustration even under very frustrating conditions with children. How would you rate the applicant's ability to be patient and stay calm?

_____ Above satisfactory _____ Satisfactory _____ Below satisfactory

6. Have you ever known the applicant to use harsh or abusive discipline with a child?

7. Would you be comfortable placing one of your own children in the care of the applicant? Why or why not?

8. What are the applicant's hobbies and recreational activities?

9. How would you rate the applicant's ability to relate with adults?

_____ Above satisfactory _____ Satisfactory _____ Below satisfactory

Can you give me an example of how the applicant relates with adults?

10. We need a person who can be supportive and understanding to a child or student. How would you rate the applicant's ability to be genuinely supportive and understanding to a person in need?

_____ Above satisfactory _____ Satisfactory _____ Below satisfactory

11. Think of a time when the applicant was able to show genuine concern for another person who needed comfort. Tell about that time.

12. Are you aware of any significant stressors recently experienced by the applicant? (An example would be a death in the family, divorce or financial crisis.)

13. Do you have any additional comments or questions?

14. How would you recommend this candidate for employment at Temple Christian School?

_____ Highly Recommend _____ Recommend
_____ Recommend with reservations _____ Do not recommend

Thank you very much for your time.

Signature of Reference: _____