# **Confidential Volunteer Application**

ſ



| For Office Use Only      |  |   |   |  |  |
|--------------------------|--|---|---|--|--|
| Date / /                 | People ID#                                   | Department                              |   |  |  |
| Department Head          | Biblical Couns                               | seling Adm                              | inistrative Pastor                          |  |  |
| OBackground check has    | s been completed and approved. Signatu       | re                                      |   |  |  |
| с <b>ў</b>               |  | re                                      | nd check is complete.                       |  |  |
|                          |  |   |   |  |  |
| Personal Information     |  | -                                       |   |  |  |
|                          |  |   |   |  |  |
| Name                     |  |   |   |  |  |
| (Last)                   | (First)                                      | (Middle)                                | (Goes by)                                   |  |  |
| Address                  | (Number, Street, Apartment/Room Number)      | City                                    | State ZIP                                   |  |  |
| Home Phone               | Cel  | II Phone                                |   |  |  |
|                          |  |   |   |  |  |
| Email                    |  | Age                                     | Date of Birth//                             |  |  |
| Occupation               |  | Employer                                |   |  |  |
|                          |  |   |   |  |  |
| Marital Status OSingle   | • OMarried OFormerly Married OWidd           |   | (If Applicable)                             |  |  |
| Where would you like to  | <b>n serve?</b> 1st choice                   | ,                                       |   |  |  |
| inicio noula you into a  |  | 2nd 010100                              |   |  |  |
|                          |  |   |   |  |  |
| Church Activity          |  |   |   |  |  |
| Are you a member of P    | allouus Dontist Church? (Vos. (No.)          | If yoo, how long have you been a memb   | er of Bellevue Baptist Church?              |  |  |
| Are you a member of b    |  | in yes, now long have you been a memb   |   |  |  |
| Which Worship Service    | <b>do you attend?</b> ○9:15 a.m. ○11:00 a    | a.m. Which Life Group hour do you atten | <b>d?</b> ○8:00 a.m. ○9:15 a.m. ○11:00 a.m. |  |  |
| Karan and a manufacture  | w of Dollars a substation what also was atte | and and have after 0                    |   |  |  |
| If you are not a membe   | er of Bellevue, what church do you atte      | end and how often?                      |   |  |  |
| Please write a brief sur | nmary of your salvation experience wi        | ith Christ (when/where):                |   |  |  |
|                          |  |   |   |  |  |
|                          |  |   |   |  |  |
|                          |  |   |   |  |  |
|                          |  |   |   |  |  |
|                          |  |   |   |  |  |

| Department Head or Life Group Teacher (Bellevue member only) | Friend | Friend |  |  |  |
|--|--------|--------|--|--|--|
| Phone  | Phone  | Phone  |  |  |  |
| Email  | Email  | Email  |  |  |  |

The information contained in this application is correct to the best of my knowledge. I authorize any person, reference, church, institution, or agency listed in this application to give to you and/or furnish any information (including opinions) that they may have regarding my character and physical demands for my area of service. I release all parties involved from any liability and responsibility for doing so. I sign this release as my own free act in exchange for the opportunity to serve as a Bellevue Baptist Church volunteer.

If allowed to serve as a volunteer and I am authorized to work with minors, I agree to follow the Child and Youth Abuse Prevention Policies for Bellevue Baptist Church, found at bellevue.org/children-policies, and to refrain from inappropriate conduct in the performance of my service on behalf of Bellevue Baptist Church. I understand that any violation of the Child Protection Policy or misrepresentation of information that I have provided may result in termination of volunteer opportunities.

### Applicant's Signature

Date\_\_\_\_/\_\_\_/\_\_\_\_

## **Leadership Covenant**

nooc (no formor omnlovore or rolativ

Bellevue Baptist Church has a continued, long-standing practice of striving to conduct only ceremonies, expecting only employee/volunteer conduct, and allowing only facility uses which are in harmony with our doctrinal beliefs as expressed in the Southern Baptist Convention's most recently adopted Statement of Faith. Believing that the privilege of guiding people to a knowledge of God's Word and a total commitment to Christian discipleship is worthy of my surrender to God's call of service, I covenant, as a leader of Bellevue Baptist Church, to believe, teach, and discipline my life according to the beliefs and doctrines found in the *Baptist Faith and Message* (sbc.net). A copy of the Baptist Faith and Message will be provided on request or can be accessed online at sbc.net/bfm2000/bfm2000.asp.

### Responsibility

With God as my help, I make a commitment to

- A daily devotional life (1 Peter 2:2b).
- Adhere to the principles of the New Testament, seeking leadership and strength of the Holy Spirit that I may be an example of Christian living (Ephesians 4:1b).
- Support the Senior Pastor, staff, and church leadership (Hebrews 13:17a).
- Participate in and support Life Groups and Worship at Bellevue Baptist Church (Hebrews 10:25a).
- Contribute my tithe to the Lord through the budget of my church (Malachi 3:10a).
- Be a peacemaker (Galatians 6:1b).
- Not abuse my social media to promote things that do not support Bellevue's mission and values and are not in harmony with our doctrinal beliefs as expressed in the Southern Baptist Convention's most recently adopted Statement of Faith. All Scripture references are NASB®

#### Is there anything in your life—any habit, attitude, or unrepentant sin—that if we knew it, we would be hesitant to allow you to serve?

 $\bigcirc$  Yes  $\bigcirc$  No

#### Is there anything you believe about the Bible or doctrinal matters that if we knew it, we would be hesitant to allow you to serve?

 $\bigcirc$  Yes  $\bigcirc$  No

If at any time I am unable or unwilling to fulfill this covenant in all good conscience, I will relinquish my position of leadership.

Date\_\_\_/

### **Background Information**



| Name(Please print)   | Date of Birth         | / /             | People ID#:         |                   |
|--|-----------------------|-----------------|---------------------|-------------------|
| (Please print)   |                       |                 | - • <u> </u>        | (Office use only) |
| Have you ever been arrested, charged, or convicted of child abuse $\bigcirc$ Yes $\bigcirc$ No   | or a crime involving  | actual or attem | oted sexual molesta | tion of a minor?  |
| Have you ever been a victim of abuse or molestation?   | ⊖No                   |                 |                     |                   |
| Have you ever been arrested, charged, or convicted of a crime?   | ⊖Yes ⊖No              |                 |                     |                   |
| If yes, provide a detailed explanation. Attach a separate page if necessary  |                       |                 |                     |                   |
|  |                       |                 |                     |                   |
| Have you ever been accused of a sexual offense, offense relating to  | o children, or a crim | e of violence?  | ⊖Yes ⊖No            |                   |
| If yes, provide a detailed explanation. Attach a separate page if necessary  |                       |                 |                     |                   |
|  |                       |                 |                     |                   |
| <b>Have you ever had drug or alcohol problems?</b> OYes ONo<br>If yes, provide a detailed explanation. Attach a separate page if necessary |                       |                 |                     |                   |
|  |                       |                 |                     |                   |
|  |                       |                 |                     |                   |

I agree to the release of all investigative records to Bellevue Baptist Church for examination for the purpose of verifying the accuracy of criminal violation information contained on this application. I waive any right that I may have to inspect references provided on my behalf.

Should my application be accepted, I agree to submit to the policies of Bellevue Baptist Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

Applicant's Signature

Date\_\_\_\_/\_\_\_/\_\_\_\_/

# **Background Information**



| Driver's License   |
|--|
|  |
|  |
|  |
| Paste front and back copy of Driver's License here.        |
|  |
|  |
|  |
| Faste <b>Front and back</b> copy of Driver's License here. |

### **Volunteer Authorization To Release Information**



Thank you for considering volunteer service! Please know that your special gifts are appreciated. In support of our commitment to providing a safe environment for all who participate at Bellevue Baptist Church, we ask that you complete this authorization and release form to conduct the necessary background checks. A criminal background screening will be conducted for all prospective volunteers/leadership that will represent Bellevue Baptist Church, and particularly, if the volunteer position you have applied for is one that involves working with minors. **Credit checks will not be conducted on any volunteer workers, except for volunteers serving in the Finance office.** 

I hereby authorize Bellevue Baptist Church and/or its agent, Protect My Ministry, to prepare consumer reports and/or investigative consumer reports (reference checks) about me for volunteer service purposes, including without limitation, for the purposes of evaluating me for volunteer assignments, reassignments and retention as a volunteer, at any time prior to or doing my volunteer service and without giving me any additional notice. The information requested below, including your birth date, is requested solely for the purpose of securing background information.

I FURTHER AUTHORIZE ALL PERSONS, EMPLOYERS, SUPERVISORS, COWORKERS, SCHOOLS, COMPANIES, CORPORATIONS, ORGANIZATIONS, CREDT BUREAUS, COURTS, AND ANY GOVERNMENTAL, LAW ENFORCEMENT, LICENSING, AND RECORD-KEEPING AGENCIES, AND ANY OTHER SOURCE OF INFORMATION TO PROVIDE ALL INFORMATION REQUESTED WITH RESPECT TO MY BACKGROUND, INCLUDING ANY CRIMINAL RECORDS, TO CHURCH AND/OR ITS AGENT, PROTECT MY MINISTRY.

I acknowledge that I have been provided with a copy of "A Summary of Your Rights Under the Fair Credit Reporting Act."

I certify that I have read and understand this entire document, including the below DISCLOSURE, and I agree that a copy of this document is as valid as the original.

#### PLEASE PRINT. ALL fields are required and signature below.

| Last Name (print as appears on driver's license) | First                        | Middle | Home Phone Number      |                  |        |
|--|------------------------------|--------|------------------------|------------------|--------|
| Former Name or Other Names Used                  |                              |        | Date of Name Change    |                  |        |
| Date of Birth                                    | Social Security Number       |        | Email Address          |                  |        |
| Current Street Address (Not P.O. Box)            | Current County (Not Country) |        | Gender (Circle One): M | F                |        |
| Current City                                     | Current State                |        | ZIP Code               | (How Long) Years | Months |

#### Please list the City, State, and ZIP Code of all other addresses you have lived at in the past 7 years. Provide additional sheets if needed.

| Street Address | City | State | ZIP Code | (How Long) Years | Months |
|----------------|------|-------|----------|------------------|--------|
| Street Address | City | State | ZIP Code | (How Long) Years | Months |
| Street Address | City | State | ZIP Code | (How Long) Years | Months |

Applicant's Signature



## **DISCLOSURE TO VOLUNTEER APPLICANT**

Please be advised that we and/or our agents, Protect My Ministry, may obtain consumer reports and/or investigative consumer reports and you for volunteer services, including with limitation, for the purposes of evaluating you for volunteering, teaching roles, leadership roles and retention as a volunteer, in Church programs and events on campus or off campus, at any time prior to or during your volunteer services and without giving you any additional notice. Pursuant to the Fair Credit Reporting Act (FCRA), consumer reports and/or investigative consumer reports (reference checks) may include, without limitation, information about your character, general reputation, personal characteristics and mode of living, whichever are applicable, as well as volunteer history, reason for volunteer termination, eligibility to volunteer again and any disciplinary actions taken against you. An investigative consumer report may involve personal interviews with sources, including without limitation, employers, supervisors, coworkers, clients, friends, associates and neighbors.

You have the right to request information from us about the nature and scope of any investigative consumer report on you that we request. The request must be made in writing and within a reasonable period of time after you have received this disclosure.

To obtain a disclosure of the nature and the scope of any investigative consumer report (reference check), please provide us a written request.

Applicant's Printed Name

Applicant's Signature

Date

Church Representative's Name

Church Representative's Signature

Date

### Summary of Your Rights Under the Fair Credit Reporting Act

### Please keep for your records

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

• You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

• You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

• a person has taken adverse action against you because of information in your credit report;

- you are the victim of identify theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
  you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

 You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

#### TYPE OF BUSINESS:

1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.

b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:

#### CONTACT:

a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552

 Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357

2. To the extent not included in item 1 above:

a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks

b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act

c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations

d. Federal Credit Unions

a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106

b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach 1775 Duke Street Alexandria, VA 22314 You have the right to dispute incomplete or inaccurate information. If you identify
information in your file that is incomplete or inaccurate, and report it to the consumer
reporting agency, the agency must investigate unless your dispute is frivolous. See
www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

 Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

 Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

• Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

• You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

• You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

• You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

3. Air carriers

Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, SE Washington, DC 20590

4. Creditors Subject to Surface Transportation Board

Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street S.W. Washington, DC 20423

5. Creditors Subject to Packers and Stockyards Act, 1921

Nearest Packers and Stockyards Administration area supervisor

6. Small Business Investment Companies

Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416

7. Brokers and Dealers

Securities and Exchange Commission 100 F St NE Washington, DC 20549

8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations

> Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090

9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357