

APPLICATION & CRIMINAL RECORD FORM

Revised 6/2006

This form is to be completed for any position involving the supervision or care of minors or vulnerable adults. This is being used to provide a safe and secure environment for the activities or programs of the church.

Name _____
Last First Middle Maiden

Additional Names: _____
Last First Middle Maiden

ID or DL# _____ **Date of Birth** _____
(Identity will be confirmed with a driver's license or official identification card.)

I will be driving for church activities using my own vehicle ____ Yes ____ No

If Yes to the above question, complete form on the reverse side of this application ➡

Present Address:

Home Phone: (____) _____

Mobile Phone: (____) _____

Work Phone: (____) _____

Occupation: _____

Email Address: _____

I have been a regular attendee at OSLC, East Bethel, MN since _____.

Personal References (list 2) – All references will be checked

Name	Complete Address	Phone Number(s)
1. _____	_____	_____
2. _____	_____	_____

- **Have you ever been arrested for, charged with, under probation for, or convicted of either sexual or physical abuse?** ____ Yes ____ No
If yes, please explain _____
- **Have you ever been convicted of a crime?** ____ Yes ____ No
If yes, please explain _____
- **Are there any legal charges pending against you?** ____ Yes ____ No
If yes, please explain _____

I hereby give my permission for Our Saviour's Lutheran Church to obtain information relating to my criminal history record. The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudication's. These above-mentioned reports may include, but are not limited to my driving history, including any traffic citations; a Social Security number verification; present and former addresses; criminal and civil history/records; any other public record. I understand that this information will be used, in part, to determine my eligibility for an employment or volunteer position with Our Saviour's Lutheran Church. I also understand that as long as I remain an employee or volunteer at OSLC the above may be repeated at any time. I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative report of which I am the subject upon my written request to Our Saviour's, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. 1681et.seq

I have received a copy of the Safety & Supervision Procedures for Children, Youth & Vulnerable Adults and accompanying forms and understand it is my responsibility to read it and understand it. I will direct any questions to the Risk Management Team at 763-434-6117.

Applicant's Signature _____ **Date:** _____

Parents Signature if Applicant is a Minor _____ **Date:** _____
(over)

For Internal Use Only	
Requested by: _____	
Routing	
<input type="checkbox"/>	Risk Mgmt.
Date _____	
Initial _____	
<input type="checkbox"/>	Barb (Shelby input)
<input type="checkbox"/>	Sara (File)
<input type="checkbox"/>	Notify Requestor

Acknowledgement of Understanding of Vehicle Policy

I understand the Vehicle Policy and Module 10 pertaining to it

I am aware that automotive insurance liability will generally follow the flow below in the event of an accident, and as such, subject me to certain liability risks.

1. Owner of Vehicle _____
Insurance Company Name and Policy Number _____

2. Driver of Vehicle _____
Insurance Company Name and Policy Number _____

3. Church (only in furtherance of church activity)

I will maintain adequate insurance coverage whenever I am driving for a church activity or my car is used in a church activity. I have read the Vehicle Policy.

Signature of Driver _____
Date _____

Telephone Interview Form

Applicant's Name _____
Last First Middle Maiden

References Contacted:

Name: _____ **Date:** _____ **Verified by:** _____

1. Are you aware of any facts demonstrating that the applicant should not be considered by our church?
___ Yes – If yes, please explain: _____

___ No

2. Based on the knowledge of this applicant, is there any reason that they shouldn't be working with minors or vulnerable adults?
___ Yes – If yes, please explain: _____

___ No

3. Do you have any additional comments concerning the suitability of this applicant as a volunteer at OSLC?
___ Yes – If yes, please explain: _____

___ No

Name: _____ **Date:** _____ **Verified by:** _____

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___ Yes – If yes, please explain: _____

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2. Based on the knowledge of this applicant, is there any reason that they shouldn't be working with minors or vulnerable adults?
___ Yes – If yes, please explain: _____

___ No

3. Do you have any additional comments concerning the suitability of this applicant as a volunteer at OSLC?
___ Yes – If yes, please explain: _____

___ No