



# Volunteer Youth Application

(Application for all Student Volunteers **under age 18**)

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

**Ministry / Ministries of interest:** \_\_\_\_\_

**General Information**

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Neighborhood/Apartment Complex/Subdivision name: \_\_\_\_\_

High School Area (ex: Clark, Brandeis, etc.) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Ph. (\_\_\_\_) \_\_\_\_\_ Cell Ph. (\_\_\_\_) \_\_\_\_\_

Bilingual:     No     Yes/Spanish     Yes/Other \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_ Grade \_\_\_\_ School \_\_\_\_\_

Parents or Guardians (names and contact phone numbers) \_\_\_\_\_

Siblings and Ages or Grades \_\_\_\_\_

Do you attend Oak Hills Church? .....  No     Yes – How long? \_\_\_\_\_

Are you or your family members of Oak Hills Church? .....  No     Yes – How long? \_\_\_\_\_

*(You or your parents attended the Discover OHC class, and signed the membership covenant)*

Have you been baptized by immersion? .....  No     Yes

**Volunteer Application - References**

Please list the three references you will ask to recommend you as a volunteer. It is your responsibility to give your references the reference forms and ensure that they are returned within 10 days of your application.

**References must be unrelated to applicant.**

**Please indicate the ministry you're applying for at the top of each reference form.**

±

Name	Address/City/State/Zip	Email & Phone	Relationship
1.			
2.			
3.			

**Mail or deliver to: Oak Hills Church, 6929 Camp Bullis Rd, San Antonio, TX 78256 / ATTN: Karan Clark**

## Volunteer Covenant for Ministry

At Oak Hills Church -- "We pray children know Jesus loves them, God's Word is real, and our events are a safe and happy place." In an effort to ensure our events are a "safe and happy place" some precautionary measures are taken to protect the children and volunteers. This is a covenant for ministry between volunteers and the Oak Hills Church.

- I understand I should be early and prepared for ministry or have secured a substitute to do the same in my absence.
- I agree to attend training offered by this ministry in an effort to increase my effectiveness as an Oak Hills Church volunteer.
- I will abide by the policies and procedure as presented in the training.
- I understand it is my responsibility to distribute a minimum of three reference forms and follow up on their completion within 10 days of my application.
- I understand if I suspect a child has been physically or sexually abused or neglected, I am by law required to report this suspicion. I will immediately contact a staff member with my concerns. I will not try to handle the situation myself.
- I will refrain from posting anything to my personal blog, Facebook, MySpace, or any other personal website that could damage the reputation of the church or my ministry.

As a volunteer of Oak Hills Church, I am aware of the expectations of the leadership at Oak Hills Church, and pledge to do my best with the help of the Lord to abide by this covenant agreement. I certify to my best knowledge, the information given in this application is true. I have fully completed the application. The signing of this commitment as a volunteer indicates my willingness to serve the church without any expectation of compensation or remuneration. My service is a gift to the church and the ministry I am volunteering for.

Print Name \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### ***Parent/Guardian Consent***

As the parent/guardian of this child/youth, I accept full responsibility of this child/youth while he/she is volunteering in this ministry. I certify that this child/youth has a full understanding of what is expected of an Oak Hills Church volunteer. I will do everything possible to help him/her meet those expectations.

I hereby grant full permission to: Oak Hills Church (its employees, volunteers or representatives). To take and use my/my child's: Photograph(s), Digital Image(s), Video Recording(s), Audio Recording(s), Quoted Remark(s), Electronic Media Image(s), and Name for use in any Oak Hills Church education, publication, advertising, promotion or production materials that may be distributed in print, audio, video, web site or other electronic communication format. I authorize the use of these materials indefinitely without compensation to me/my child. All negatives, positives, prints, digital reproductions and video and audio recordings shall be the property of Oak Hills Church. This consent also serves to waive all rights of privacy. Materials will be kept as long as they are relevant and after that time destroyed or archived. I further agree that my/my child's name and identity may be revealed in descriptive text or commentary in connection with the image(s).

Print Name \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_

Home Ph. (\_\_\_\_) \_\_\_\_\_ Cell Ph. (\_\_\_\_) \_\_\_\_\_ Work Ph. (\_\_\_\_) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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# Volunteer Youth Reference Form

\_\_\_\_\_  
VOLUNTEER NAME

\_\_\_\_\_  
MINISTRY

Dear \_\_\_\_\_  
Reference's Name (Must be unrelated to applicant) Phone Number

\_\_\_\_\_  
Street Address City State Zip Code

\_\_\_\_\_ (applicant's name) is applying to become a volunteer at Oak Hills Church and has given your name as a personal reference. Please (1) complete the form, (2) sign at the bottom, (3) enclose form in envelope, and (4) drop it in the mail on or before \_\_\_\_/\_\_\_\_/\_\_\_\_ (10 days from the date of application).

How long have you known this person? \_\_\_\_\_

Describe your relationship with this person. \_\_\_\_\_

Use the chart to rate the applicant in the areas listed.

1-low		2-below average		3-average		4-very good		5-excellent		n/a-not observed	
1	2	3	4	5	N/A						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to work as a healthy team member				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to relate to children				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to discipline children in a positive way				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to relate to adults				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to follow through with commitments				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to respond well under supervision of a coordinator				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ability to be dependable and punctual				

What are this applicant's greatest strengths? \_\_\_\_\_

Do you have any concerns regarding this person?  No  Yes

If yes, please explain. \_\_\_\_\_

Thank you for taking the time to complete this form. If you have questions regarding this reference, please contact Karan Clark at 210.698.4669.

*I certify I have honestly completed this form to my best knowledge.*

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

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