



**okolona CHRISTIAN CHURCH**  
**Security Application**

<b>OFFICE USE ONLY</b>	
___ EN	___ ST
___ RF1	___ ST App
___ RF2	___ BGC
___ RCK	___ BY
___ RCK	___ BY

This application is to be **completed** by all applicants for the following positions: Leadership, Children's, Student, Safety, Medical Response, Stewardship, Accounting and Missions.

**Please return this form** to OCC office, Attention: Security Secretary or to the area Minister/Director.

**1. PERSONAL INFORMATION**

Full Legal Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

If married woman, Maiden Name \_\_\_\_\_ Other previous last names \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Number of consecutive years residing in Kentucky \_\_\_\_\_ If less than 5, please indicate your address(es) for the last 10 years: \_\_\_\_\_

Are you a member of OCC? Yes \_\_\_ No \_\_\_ If no, how long have you been attending? \_\_\_\_\_

1. Have you ever been accused and/or convicted of domestic violence, pornography, child abuse, child molestation or any other sexual or personal assault or other violent crime? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

2. Were you ever the victim of abuse, molestation or violence? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

3. Have you ever been counseled for any of the situations described above? Yes \_\_\_ No \_\_\_

4. Have you ever been accused and/or convicted of any crime involving drugs or alcohol? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

5. Have you ever received counseling for drug or alcohol abuse? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

6. Have you had, or do you currently have a problem with alcohol or drug abuse? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

7. Have you ever been accused and/or convicted of any felony or misdemeanor related to theft, fraud or any related offense? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

8. Have you had, or do you currently have a financial problem? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

9. Have you had, or do you currently have a gambling problem? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

**2. APPLICANT'S STATEMENT**

The information contained in this application is correct to the best of my knowledge. I understand that Okolona Christian Church is relying on the information provided in this application and upon the information provided by references to determine my suitability for work in the volunteer position indicated below.

Therefore, I hereby:

- ◆ Authorize all references listed in this application to provide any information, both oral and written, including opinions, that they may have regarding my character and fitness for work in said position.
- ◆ Release all such references from any liability for furnishing such information and/or evaluations to Okolona Christian Church, if they do so in good faith and without malice.
- ◆ Authorize any party and/or agency contacted by Okolona Christian Church to furnish information concerning my past activities relating to criminal conduct, if any.
- ◆ Release any party and/or agency from all liability regarding the release and/or use of said information relating to criminal conduct.
- ◆ Waive any right that I may have to inspect references provided on my behalf.
- ◆ Authorize Okolona Christian Church to obtain periodic criminal background checks on myself.

If my application is accepted, I agree to be bound by the bylaws and policies of Okolona Christian Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church. I further agree to be bound by the policies and decisions of the Elders of Okolona Christian Church.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### 3. REFERENCES

Please give the names of four (4) adult references who have witnessed your interaction with children/youth. These individuals will have seven (7) days in which to respond to our request for a reference. Please let them know you are depending on their quick response.

**NOTE: We CANNOT accept references from family members, employers or OCC staff members.**

(Reference 1) Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

(Reference 2) Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

(Reference 3) Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

(Reference 4) Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

### 4. AREA OF INTEREST—I am interested in working in the following Ministry area/areas (please circle):

Children's Ministry:   Nursery            Preschool            Elementary  
 Student Ministry       Safety Team        Medical Response       Missions            Leadership  
 Stewardship            Accounting Services       Other \_\_\_\_\_

**Do not write below this line—office use only**

Reference 1	Date (e)mailed _____	Response Received _____	Reference Response: (circle one) Satisfactory	Unsatisfactory
Reference 1	Date (e)mailed _____	Response Received _____	Reference Response: (circle one) Satisfactory	Unsatisfactory
Reference 1	Date (e)mailed _____	Response Received _____	Reference Response: (circle one) Satisfactory	Unsatisfactory
Reference 1	Date (e)mailed _____	Response Received _____	Reference Response: (circle one) Satisfactory	Unsatisfactory

**Applicant approved by** \_\_\_\_\_ **Date** \_\_\_\_\_