

**The Presbyterian Church of Washington
Employee/Volunteer Application
Washington, Missouri**

Name _____
Last First Middle

Address _____
Street _____
City State Zip Code

Driver's License Number _____ State _____ Expiration Date _____

Daytime Phone _____ Evening Phone _____

E-mail address _____

Work or volunteer experience in the past five years:
(Attach additional page(s) as necessary)

Organization/Individual Name _____
Address _____
City, State, Zip Code _____
Reference _____ Phone _____
Date _____
Responsibilities _____

Organization/Individual Name _____
Address _____
City, State, Zip Code _____
Reference _____ Phone _____
Date _____
Responsibilities _____

Organization/Individual Name _____
Address _____
City, State, Zip Code _____
Reference _____ Phone _____
Date _____
Responsibilities _____

Name of the church where I am currently a friend or Member: _____
I have been a member since _____
I have been attending this church regularly since _____

Presbyterian Church of Washington
Confidential
Part 1

The covenants between persons seeking employment or authorized volunteer positions in the church require honesty, integrity, and truthfulness for the health of the church. To that end, I attest that the information set forth in this application is true and complete. I understand that any misrepresentation or omission may be grounds for rejection of, consideration for, or termination of the position I am seeking to fill. I acknowledge that it is my duty to reasonably amend the responses and information I have provided if I come to know that the response or information was incorrect when given or, though accurate when given, the response or information is no longer true.

I authorize The Presbyterian Church of Washington and/or its agents to make inquiries regarding all statements I have set forth above. I also authorize all entities, persons, former employers, supervisors, courts, law enforcement, and other public agencies to respond to inquiries concerning me, to supply verification of the statements I have made, and to comment on and state opinions regarding my background character. I expect comments and statements by such persons to be made in good faith and without malice.

The Presbyterian Church of Washington's hiring and authorized volunteer recruitment process involves the distribution of information regarding applicants among those persons in a position to recruit, secure, and supervise the position I am seeking to fill. To that end, I authorize The Presbyterian Church of Washington and its agents to circulate, distribute, and otherwise share information gathered in connection with this application to such persons for these stated purposes.

(Signature)_____

(Parent/guardian if applicant is under 18)_____

(Date)_____

Presbyterian Church of Washington
Liability Release Form
Part 2

I understand that the information I have provided may be verified by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me. I hereby release and agree to hold harmless from liability any person or organization that provides truthful and accurate information. I also agree to release and hold harmless actions taken in connection with the Employee/Volunteer Application, this church, and the employees and volunteers thereof.

____ I waive the right to inspect references, letters, or statements provided on my behalf.

____ I do not waive the right to inspect references, letters, or statements provided on my behalf.

Applicants Signature

Date

Print name

Presbyterian Church of Washington
Consent for Criminal Background History Check
Authorization/Waiver/Indemnity
Part 3

Each staff member or volunteer who is to be screened must sign an authorization, waiver, indemnity form giving approval for this church to perform the criminal background search.

I hereby give my permission for this 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 adjudications. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history records check may be repeated at any time.

I, the undersigned, do, for myself, my heirs, executors, and administrators, hereby remise, release, and forever discharge and agree to indemnify the reporting agencies and each of their officers, directors, employees, and agents and hold them harmless from and against any and all causes of actions, suits, liabilities, cost, debts and sums of money, claims, and demands whatsoever (including claims for the negligence, gross negligence, and/or strict liability of the reporting agencies, any and all related attorney's fees, court cost, and other expenses resulting from the investigation of my background in connection with my application to become a volunteer/staff member).

Applicant's signature

Date

Print name