

Before returning your forms, please ensure that you have read every section and completed all information to the best of your knowledge. Please return back to the church office at 49 Gilcomston Park, Aberdeen, AB25 1PN.

Section A – Personal Details

CONTACT DETAILS

Full Name:	Gender:
Name you like to be called, if applicable:	DOB:
Home Address:	(if less than 12 months, please provide previous address) Previous address:
Home Tel:	Mobile:
Email:	
Are you a member of the PVG Scheme either at City Church or another organisation?	YES / NO

CURRENT MINISTRY(S) INVOLVED IN

e.g. Welcome Team , M.A.D. etc:

NEW MINISTRY(S) APPLIED FOR

e.g. Welcome Team , M.A.D. etc:

POSITION APPLIED FOR WITHIN NEW MINISTRY(S)

e.g. leader, team member etc:

Section B – Belonging

Not applicable for "Existing" volunteers

Section C - Character

REFERENCE

Please give the details of someone who would be able to supply a reference if required. This person should ideally be someone from **CITYCHURCH**/ your Small Group Leader, or if not possible then someone you have known for **at least 2 years**. If you have recently joined **CITYCHURCH** and have been to a church previously, please refer us to somebody from within that church.

Name:	Address:
Phone (daytime or mobile):	
Email:	
Relationship/Role:	Length of time known:

AVAILABILITY AND ACCEPTANCE (please circle your answer)

Have you discussed the requirements of the above team with a current Team Leader, and can therefore make the necessary commitments?	YES / NO
Are you willing to attend any Team training sessions or prayer meetings that may be called?	YES / NO
Have you provided us with a Photo I.D. showing your name and current home address?	YES / NO

I certify that the information in this application is accurate and complete to the best of my knowledge and consent to further checks made by relevant authorities as necessary.

I have read the People Safe guidelines and understand that it is my duty to protect children, vulnerable adults and others in prayer ministry with whom I come in contact.

I agree to abide by the policies and procedures agreed by the church leadership with regard to ministry positions.

Signed: _____

Date: _____

ID Provided and seen/checked by Leader:	
Name:	
Signature:	
Position:	Date: