

Confidential Screening Form

RATIONALE

The purpose of this form is to allow Go Ministries Inc. to effectively recruit volunteers to participate in mission trips in which we participate. We want those who volunteer in ministry roles that publicly represent GMI to be growing in the grace and knowledge of the Lord Jesus and to be pursuing a life worthy of saying, "Follow me as I follow Christ." The following questions are to help us discern this, as well as provide a safe environment for those who participate in the various ministries of GMI. Answering "yes" to any of the following questions will not necessarily disqualify you from serving as a volunteer. However, we may choose to have you follow up with a team leader in private, to see whether you might need pastoral assistance or counseling regarding the matter and to discern if the issue has a bearing on your suitability to represent Go Ministries in volunteer ministry. This conversation would happen before serving in a volunteer role.

PERSONAL INFORMATION

1. Today's Date: _____ Social Security # _____ DOB: _____
2. Race: _____ Sex: Male Female
3. Last Name: _____ First Name: _____ Middle: _____
4. Have you been known by any other name? (Including maiden name, name changes, etc.) If yes, please list:

5. **Current Address:** _____ How Long? _____
City: _____ State: _____ Zip: _____ County: _____
Home Phone: _____ Business Phone: _____ Cell: _____
6. If you have lived at above address for less than five (5) years, please list previous address below:
Current Address: _____ How Long? _____
City: _____ State: _____ Zip: _____ County: _____
Home Phone: _____ Business Phone: _____ Cell: _____
7. Have you ever been the subject of an investigation or inquiry involving physical, mental or sexual abuse?
Yes No (If yes, please attach an explanation on a separate page.)
8. Have you ever been physically, mentally or sexually abused?
Yes No If yes, did you receive counseling? Yes No
9. In the last twelve months, have you deliberately and repeatedly viewed pornography? (This includes reading, watching, listening to, or in any other way using pornographic material)?
Yes No (If yes, when?) _____
10. In the last twelve months, have you abused alcohol or legal drugs OR used illegal drugs?
Yes No (If yes, when?) _____
11. Do you have a current Driver's License? Yes No State: _____ Lic. # _____

PREVIOUS VOLUNTEER/WORK HISTORY

12. List all your previous church work which involved preschool, children and/or youth (*please list each church's name with city and state as well as the type of work you performed, along with dates*):

Church: _____
Contact Person: _____
City: _____ State: _____
Phone: _____
Fax or Email: _____
Type of work: _____

Church: _____
Contact Person: _____
City: _____ State: _____
Phone: _____
Fax or Email: _____
Type of work: _____

13. List all previous NON-church work which involved preschool, children and/or youth (*list each organization name with city and state as well as the type of work you performed, along with dates*):

Organization: _____
Contact Person: _____
City: _____ State: _____
Phone: _____
Fax or Email: _____
Type of work: _____

Organization: _____
Contact Person: _____
City: _____ State: _____
Phone: _____
Fax or Email: _____
Type of work: _____

The information I have provided on this application is true and correct to the best of my knowledge. I authorize any reference or church provided in this application to give you any information (including opinions) that they may have regarding my character and fitness for work with preschool, children or youth. In consideration of the receipt and evaluation of this form by Go Ministries, Inc. (GMI), I hereby release any individual, church or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization. I further authorize a representative of GMI to do initial and subsequent random criminal background checks and abuse registry checks. I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREIN AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and understand.

Participant Signature: _____ Date: _____

NOTARY

State of: _____ County of: _____

This instrument was acknowledged before me this _____ day of _____, _____
(month) (year)

By _____, who is personally known by me or proved on the basis of satisfactory evidence to be the person(s) who appeared before me.

Notary Signature: _____ (Seal)

My Commission expires: _____