The Church of the Nazarene Los Angeles District Safety Application Form for Ministerial Candidates

CONFIDENTIAL

This application should be completed by all applicants for any ministerial position. This is not an employment application. The purpose of this form is to assist in the creation of a safe environment in our churches.

Name:	
Phone:	
Drivers License #	Social Security #
Sex: M F	Date of Birth:
Marital Status: (single, ma	rried, separated, divorced, widowed, etc.)
How long have you lived at your current a	address?
Previous address: (if less than 5 years at cu	arrent address)
List all other cities and states where you h	ave lived as an adult:

Please list the name, address, city and state of other churches you have attended regularly during the
past 10 years:
Please list <i>all previous church work</i> involving children, students or vulnerable populations. (List each church's name and address, type of work carried out, dates, and a contact person familiar with your work there. Use back of this page for more space, if necessary.)
Please list <i>all previous non-church work</i> involving children, students or vulnerable populations. (List each organization's name and address, type of work carried out, dates and a contact person familiar with your work there.)
Have you experienced any significant physical or emotional stresses within the past year, such as the loss of a parent, spouse, or child, extreme ill health, or any emotional or physical crisis? If so, please briefly explain. (Use back of page if necessary.)

Do you consider yourself to have been physically or sexually abused as a child? (This information will be kept entirely confidential.)
If you were physically or sexually abused as a child, would you consider utilizing church resources to seek healing in this area of your life?
Have you ever physically or sexually abused a child?
Has someone ever accused you of abusing a child?
RELEASE
I authorize The Church of the Nazarene to contact all individuals, organizations and references listed on this Safety Application Form in order to verify the information I have provided to the church. I agree to release from liability any person or organization that provides information concerning me, including those persons I have listed as references, as well as contact persons from my previous church and non-church work, listed on this application.
I specifically authorize the church to undertake a criminal background check concerning my past.
I understand and agree that any information received from the background check and application verification will not be disclosed to me, and I hereby waive any right I may have to inspect any information provided about me by any person or organization identified by me on this form.
By signing this form, I certify and affirm that the information I have given on this form is true, complete and correct in all respects.
Signature: Date: