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**ENCOUNTER BAPTIST CHURCH - SAFE MINISTRY CHECK  
(SCREENING QUESTIONAIRE FOR LEADERS & VOLUNTEERS)**

**PERSONAL DETAILS**

Title Surname Christian name Previous names Male/Female (circle)

Address:

Home phone number: Work phone number:

Mobile phone number: Email:

Date of birth: Marital status:

**CONSENT**: I consent to the information contained in this application including the subsequent pages to be kept by our church. I understand that this information will be kept in a confidential file and used only for screening and disciplinary purposes.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Background Information**

Please tick either “yes” or “no” for each question.  
If the answer to any of the following questions is “yes”, please give details *on a separate page.*  
**NOTE:** A “yes” answer will not automatically rule an applicant out of selection.

|  |  |  |
| --- | --- | --- |
| Question | Yes | No |
| 1. Do you have any health problem(s) which may affect you volunteering for the church? |  |  |
| 1. Have you ever been convicted of a criminal offence? |  |  |
| 1. Have you ever been charged with a criminal offence? |  |  |
| 1. Have you ever had permission to undertake paid or voluntary work with children or other vulnerable people refused, suspended or withdrawn in Australia or any other country? |  |  |
| 1. Have you ever engaged in any of the following conduct, even though never having been charged?  * Sexual contact with someone under your care other than your spouse (such as parishioner, client, patient, student, employee or subordinate) * Sexual contact with a person under the age of consent * Illegal use , production, sale or distribution of pornographic materials * Conduct likely to cause harm to people, or to put them at risk of harm. |  |  |
| 1. Has your driver’s licence ever been revoked or suspended? |  |  |
| 1. Have you ever had an apprehended violence order, order for protection or the like issued against you as a result of allegations of violence, abuse, likely harm, harassment, stalking etc? |  |  |
| 1. Has a child or dependent young person in your care (as a parent or in any other capacity) ever been removed from your care, or been the subject of a risk assessment by the authorities? |  |  |
| 1. Have you done anything in the past or present that may result in allegations being made against you of child abuse?   Abuse means: bullying, emotional abuse, harassment: neglect; physical abuse; or sexual abuse. |  |  |
| 1. Have you ever done anything in the past or present that may result in allegations being made against you of bullying or any form of harassment of adults? |  |  |
| 1. To your knowledge, have you ever been the subject of an allegation of sexual abuse or sexual misconduct? |  |  |
| 1. Have you a history of alcohol abuse or a history of substance abuse including prescription, over-the-counter, recreational or illegal drugs? |  |  |

**RECORD OF CHRISTIAN CHURCH MEMBERSHIP**

List church organisations, churches, congregations of which you have been a member in the past 10 years

Name of Church Position Location WHEN Month/Year

**Desire and Suitability for Ministry**

1. Can you describe more fully the reasons you desire to be involved with this ministry’?
2. Can you describe a positive experiences in your past ministry?

1. Can you describe a negative experiences in your past ministry?
2. Do you consider yourself a positive role model? Why/Why not?
3. Is there any other information relating to your suitability for this ministry you wish to share?

**Character References**: Please provide two (2) referees. Referees must be over eighteen years of age and able to give a report (by telephone only) on your good character and suitability for ministry.

Referee 1 : Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referee 2 : Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(enter full name), do solemnly and sincerely declare that:

1. The information I have provided in this application and the information contained in any document accompanying this application are true and correct to the best of my knowledge and belief.
2. I understand that any material misstatement in or omission from this questionnaire may render me unfit to hold a particular or any office in the Church.
3. I will provide a Police Check every two years and a Working with Children Check.
4. I have read, understood and will abide by the Encounter Baptist Church Ministry Leaders’ Code of Conduct.

Applicant’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SENIOR PASTORS ENDORSEMENT (To be completed by the Senior Pastor)**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as the Senior Pastor or Encounter Baptist Church endorse and support the applicants application to be involved in ministry, provided they meet the other necessary screening requirements.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_