

**White Plains United Methodist Church (WPUMC)  
Children/Youth Work Renewal Application for Volunteers**

Name: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_(home)\_\_\_\_\_ (cell)\_\_\_\_\_ (work)

Email Address \_\_\_\_\_ SS# \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License # \_\_\_\_\_ State: \_\_\_\_\_

In which children/youth program(s) are you currently involved?

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In what other children/youth program(s), if any, do you plan to become involved?

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**Have you at any time ever:**

- Been arrested for any reason? . . . . .  Yes  No
- Been convicted of, or plead guilty or no contest to  
any criminal offense of any kind? . . . . .  Yes  No
- Participated in, been accused of, plead guilty or no contest to  
any abuse or sexual misconduct? . . . . .  Yes  No

**Are you aware of:**

- Any traits or tendencies that could pose any threat to  
children, youth or other vulnerable persons? . . . . .  Yes  No
- Any reason why you should not work with children,  
youth, or other vulnerable persons? . . . . .  Yes  No

If the answer to any of these questions is "yes", please explain in detail on the back.

**Applicant Verification and Release**

I recognize that WPUMC is relying on the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct. I voluntarily release WPUMC from liability involving the communication of information relating to my background or qualifications. I further authorize WPUMC to conduct a criminal background investigation.

I have carefully read the Safe Sanctuary policy and procedures and I agree to abide by them and to protect the health and safety of the children or youth at all times.

**Printed name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_