



# CORNERSTONE

## CHURCH OF HOUSTON

### Safety Application Form

#### Confidential

This application should be completed by all applicants for any position (volunteer or employment) involving the supervision of children or students. This is not an employment application. The purpose of this form is to assist in the creation of a safe environment for children or students who participate in the programs of Cornerstone Ministry or use Cornerstone Ministry facilities. *The information provided on this page will be used to run your background check as a part of the application process.*

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

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

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

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Drivers License # \_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Sex: \_\_\_\_\_ M \_\_\_\_\_ F Date of Birth: \_\_\_\_\_ Marital Status:

\_\_\_\_\_ (single, married, separated, divorced, widowed, etc.)

How long have you lived at your current address?

\_\_\_\_\_

Previous address: \_\_\_\_\_

\_\_\_\_\_

List all other cities and states where you have lived as an adult:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list all previous volunteer work or employment involving children or students

---

---

---

---

---

List any talents, vocations, preparation, training or other experiences that have equipped you to work with children or students (ie- CPR certified, other youth training, etc):

---

---

---

#### Personal References

Please complete the following. References must include one family member and one member of the opposite sex. Please contact these references and inform them an authorized Cornerstone staff person will be contacting them.

#### **Personal**

Name:

Phone:

Email:

Address:

City/State:

Zip:

**Professional**

\*If you do not have a professional reference, please just use an additional personal one.

Name:

Phone:

Email:

Address:

City/State:

Zip:

**Family member**

Name:

Phone:

Email:

Address:

City/State:

Zip:

Because we care for children and desire to protect them, please answer the following questions. We understand that the answers to these questions may be private and deeply personal, and we will protect your privacy in every possible context. If you would like to discuss any of these matters further with Cornerstone leadership, please simply indicate that below or leave the form blank.

Why do you want to work with children or students at Cornerstone?

---

---

---

Do you have a preference concerning the age group or sex of children or students with whom you would like to work? If so, what is the basis for this preference?

---

---

What is your philosophy concerning re-direction or discipline of children?

---

---

---

Have you ever physically or sexually abused a child?

---

---

Has someone ever accused you of physically or sexually abusing a child, or molesting a child?

---

---

Is there anything in your past that you feel like we should know about?

---

---

---

RELEASE

I authorize Cornerstone Church of Houston to contact all individuals, organizations and references listed on this Safety Application Form in order to verify the information I have provided. I agree to release from liability any person or organization providing information related to me, including those persons I have listed as references, as well as contact persons from my previous volunteer work or employment with children.

I specifically authorize Cornerstone Church of Houston 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 except as required by law, 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: \_\_\_\_\_