



43065 Joy Road Canton, Michigan 48187
Phone: 734.459.3505

VOLUNTEER APPLICATION / Volunteer: Any

individual desiring to work directly and regularly with children or youth at Plymouth Christian Academy.

Date _____

First time applicant

NAME _____ **DATE OF BIRTH** ____ / ____ / ____
Last First Middle

OTHER NAMES BY WHICH YOU MAY HAVE BEEN KNOWN, (i.e., maiden name)

DRIVER'S LICENSE

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____

E-MAIL

LIST PCA STUDENTS TO WHOM YOU ARE RELATED:

IN WHICH CHILD/YOUTH SCHOOL PROGRAM ARE YOU SEEKING TO BECOME INVOLVED?

EDUCATION (Educational background, degrees, special skills)

EMPLOYMENT (if applicable)
Current Employer

Employer's Address

(street / P.O. Box) (city, state, zip)

Current Job Title _____
Dates of Employment? _____

Do Current Job Duties include interacting with children? Yes No

WHAT OTHER CHILDREN/YOUTH WORK EXPERIENCE DO YOU HAVE? (Please list any organizations or programs)

Have you at any time ever:

- Been arrested for any reason? Yes
 No
- Been engaged in, or been accused of any child molestation, Yes
 No
exploitation, or abuse?
- Been convicted of, or pleaded to no contest to, any crime? Yes
 No
- Been convicted of any offense listed on Attachment 1? Yes
 No
- Are you currently under indictment or arraignment for any offense listed on Attachment 1?
 Yes No

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

References (Other than relatives)

Name/Relationship *Complete Address (street, city, state, zip)

Phone _____

Name/Relationship *Complete Address (street, city, state, zip)

Phone _____

Applicant Verification and Release

I recognize that the organization to which this application is being submitted is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information I have provided is absolutely true and correct. I authorize the organization to contact any person, employer, or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications. I acknowledge that my volunteer service is at the discretion of PCA and may be suspended, rescinded or revoked by PCA at any time for any reason.

I voluntarily release the organization and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation. If I am selected for Plymouth Christian Academy's Volunteer Program, I agree that my service is voluntary and I will not be considered an employee or independent contractor of PCA. I further acknowledge that I have no expectation of remuneration or other compensation for performing any services and no promises of compensation or remuneration were made by PCA to me.

I have carefully read the policy and guidelines of the organization, and I agree to abide by them and I agree to protect the health and safety of the children and youth of Plymouth Christian Academy at all times.

Printed Name:

Signature: _____ Date _____