

Evangelical Free Church
2910 E. Lincoln, Bloomington, IL 61704

Anchor's Away
CHILD CARE HELPER APPLICATION

Name: _____

Email Address: _____

Mailing Address: _____

Telephone: _____

Please indicate the ages with which you are most comfortable (although we must place you where we most need you, it is helpful to know your preferences):

_____ Infant (0–12 months)

_____ Toddler (1–2 years old)

_____ Preschoolers (3–5 years old)

CPR Certified: _____ Yes _____ No

Tell Us About Yourself:

List Child-care Experience and Classes:

List any gifts, training, education that have prepared you to work with children

Church and Family Background:

Other helpful information you'd like to share:

Employment Experience (Past Two Years):

Name of Company/Organization _____

Telephone _____ Position Held _____

Employment Dates (Begin & End, Month & Year) _____

Name of Company/Organization _____

Telephone _____ Position Held _____

Employment Dates (Begin & End, Month & Year) _____

Please List Three Character References (other than relatives):

Name _____ Telephone _____
 Address _____
 Relationship _____
 Name _____ Telephone _____
 Address _____
 Relationship _____
 Name _____ Telephone _____
 Address _____
 Relationship _____

The questions listed below are a part of our interview process in order to help provide a safe and secure environment for our children. All information is held strictly confidential by the church staff. Answering “yes” to any of the questions may not necessarily preclude your involvement as a helper at E-Free. Thank you for understanding.

- Have you ever been convicted for use or sale of drugs? _____
- Have you ever been hospitalized or treated for alcohol or substance abuse? _____
- Have you ever been arrested for a criminal offense excluding minor traffic violations? _____
- Have you ever been accused, arrested or convicted for any sexually related crimes? _____
- Have you ever been accused, arrested or convicted for any abuse-related crimes? _____
- Are there any circumstances involving your life-style or your background that would call into question your ability to work with children? _____

If you answered “Yes” to any of the above questions, please explain:

Applicant’s Statement

The information contained in this application is correct and to the best of my knowledge. I authorize any references, churches or other organizations listed in this application to give you any information they may have regarding my character and fitness for working with children. I release all such references from liability for any damage that may result from furnishing such evaluations to you.

I understand that the personal information will be held confidential by the church staff.

Signature _____ Date: _____

To be completed at a later date:

In order to maintain the highest level of security for our children, a routine criminal background check will be conducted on all applicants. Results of the background check will not be used for any unlawful purpose.

Driver’s License Number: _____ State where issued: _____
 Social Security Number: _____ Date of birth: _____

I agree and consent to allowing The Evangelical Free Church to conduct said check.

Signature: _____ Date: _____