

**Mount Calvary Baptist Church**  
**VOLUNTEER NURSERY WORKER APPLICATION**



**PERSONAL**

Name \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Classification, if BJU Dorm Student: \_\_\_\_\_

What past nursery experience do you have? *(Please List)* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization	Program	Dates	Contact Name and Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**CHURCH ACTIVITY**

What church or churches have you attended in the past five years

Church's name and address	Pastor's name	Years Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

**REFERENCES (Other than relatives)**

Name/Relationship	Address	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 that I have provided is absolutely true and correct.

I authorize the organization to contact any person 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 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 have carefully read the policy and procedures of the organization, and I agree to abide by them and to protect the health and safety of the children at all times.

**Printed Name:** \_\_\_\_\_

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

**Please remember to watch the two "Risk" videos on our church website (<https://www.mountcalvarybaptist.org/nursery/>), and also go through the background check process at <https://www.mountcalvarybaptist.org/pmm/>.**