

**Oak Haven Church**  
**Children's and Youth Ministries**  
**Volunteer Abuse Prevention Screening Form**

Full Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_ Birthday \_\_\_\_\_

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

**PERSONAL HISTORY:**

Are you a member of Oak Haven Church? Yes No

Are you a regular attendee at Oak Haven Church? Yes No If yes, for how long? \_\_\_\_\_  
**You must have been in attendance here for 6 months to serve in any children's or youth ministries.**

If yes, which ministries have you been involved in or served in at Oak Haven Church?

\_\_\_\_\_  
If you have been attending Oak Haven Church for less than five years, please list any churches you have regularly attended or volunteered at during the past five years:

1. \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_ Phone \_\_\_\_\_

Please list other work with children/youth you have performed in the past five years. *(List organizations)*

1. \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_ Phone \_\_\_\_\_

**PERSONAL REFERENCES:**

Please list the names of two adults who have observed you interacting with children/youth. Do not list relatives but this may include friends and/or members of Oak Haven Church or other character references such as employers, teachers, or friends.

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

