



Office Use Only Date received \_\_\_\_\_ Date Approved \_\_\_\_\_  
 Recommended  Not Recommended  Recommended with conditions noted  
Signature \_\_\_\_\_

# Adventurer Staff/Volunteer Service Information Form

## SECTION I DATE OF RECORD

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Church \_\_\_\_\_ Adventurer Club \_\_\_\_\_  
FOR USE ONLY IN EMERGENCY OR WITH PERMISSION

Marital Status:  Married  Single  Divorced Name of Spouse \_\_\_\_\_

Children: Name Birthdate: Month/ Day /Year  
1. \_\_\_\_\_ / /  
2. \_\_\_\_\_ / /  
3. \_\_\_\_\_ / /  
4. \_\_\_\_\_ / /  
5. \_\_\_\_\_ / /

## SECTION II HEALTH HISTORY

Do you now have or have you had injury/sickness that might limit your involvement in the Adventurer Club Activities?

Yes  No If yes, how would it hinder? \_\_\_\_\_

## SECTION III EDUCATIONAL RECORD

Highest Degree/Diploma Held \_\_\_\_\_ Year Degree/Diploma was received: \_\_\_\_\_

School Granting Degree or Diploma \_\_\_\_\_

College Major/Minor \_\_\_\_\_

## SECTION IV EXPERIENCE

List all experience (Pathfinder/Adventurer, Scouts, Sabbath School, etc.) that might qualify you for Adventurer Staff.

Position/Type of Work Church/Organization Date of Service

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## SECTION V AWARD INSTRUCTION ABILITY

Please list the awards/crafts which you are interested in teaching. [Check T-Teach A-Assist or I-Interested in team teaching.]

Award/Craft		Award/Craft	
_____	<input type="checkbox"/> T <input type="checkbox"/> A <input type="checkbox"/> I	_____	<input type="checkbox"/> T <input type="checkbox"/> A <input type="checkbox"/> I
_____	<input type="checkbox"/> T <input type="checkbox"/> A <input type="checkbox"/> I	_____	<input type="checkbox"/> T <input type="checkbox"/> A <input type="checkbox"/> I
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_____	<input type="checkbox"/> T <input type="checkbox"/> A <input type="checkbox"/> I	_____	<input type="checkbox"/> T <input type="checkbox"/> A <input type="checkbox"/> I

**SECTION VI UNLAWFUL CONDUCT**

Have you been accused, charged, or disciplined for any unlawful sexual conduct, child abuse, and/or child sexual abuse? Yes No  
If yes, please explain and if possible, give the name and address of a reference/professional who can verify that you are now suitable for Adventurer Staff/Leadership.

Date/Place \_\_\_\_\_

Type of Conduct \_\_\_\_\_

Reference Name, Address and Phone Number \_\_\_\_\_

STREET CITY STATE ZIP CODE

**SECTION VII REFERENCES**

Please list below three individuals who know you well enough to recommend you as an Adventurer staff person.

	NAME	ADDRESS	PHONE
1. Pastor	_____	_____	_____
2. Local Teacher	_____	_____	_____
3. Other	_____	_____	_____

**SECTION VIII STATEMENT OF ACCURACY**

The above information is accurate to the best of my recollection. I understand this is strictly a volunteer position and I will receive no remuneration for services and time volunteered.

\_\_\_\_\_  
*APPLICANT'S SIGNATURE*

\_\_\_\_\_  
*DATE*

**POLICY OF THE IOWA-MISSOURI CONFERENCE YOUTH MINISTRIES DEPARTMENT**

It is the policy of the Iowa-Missouri Conference Youth Ministries Department that anyone working in the Pathfinder or Adventurer Ministries must fill out one volunteer form and the Background Release Form. It is essential that our club environments be kept safe. Anyone who does not wish to fill out the form should seek ministry service in another department.

**THIS FORM IS AN INVOICE**

Please consider the completion of this form an invoice. There will be a \$11.00 charge for all those requests processed in Iowa. Requests processed in Missouri will have a \$16.00 charge. If other states are involved, please call or check the Youth Ministries Website.

**RETURN TO: YOUTH DEPARTMENT, IOWA-MISSOURI CONFERENCE, PO BOX 65665, WEST DES MOINES, IA 50265**

**NOTES**

- Please make sure you have checked the appropriate box in Section VI and signed your name in section VIII.
- Section VI and the Background Check deals with unlawful conduct. This section has been included to protect the Pathfinder and Adventurer members from abuse and to protect the Seventh-Day Adventist Church organization from recommending any staff member who has a problem in this area.
- If the conference director recommends the applicant, information in Sections I-V will be copied and sent to the club stated for the director to use in determining staff qualifications. If the applicant is not approved, none of the information will be forwarded.
- When a local club director requests a recommendation from the conference director he/she may not release any specifics and may respond only with "recommended" or "not recommended" or recommended with conditions."
- All information on this application will become a permanent record and should include updates. In the event of accusation against the applicant, opportunity should be given for response by the accused. This response also becomes a part of the record.
- We regret having to address unlawful conduct, however, understanding the epidemic proportion of this problem, it becomes necessary to create a database to protect child, parents, staff and the church.