

OUTPOST# _____
SECTION _____

NEW YORK DISTRICT OF THE ASSEMBLIES OF GOD AUTHORIZATION FOR PREVIOUSLY APPROVED STAFF APPLICANTS

In that an original application and references are on file, we are using this form to update our records. Great reliance is placed on the representation of each applicant's pastor, youth pastor, or church board member that there are no facts or allegations that raise any question concerning an applicant's suitability for working with minors. **PLEASE HAVE YOUR SENIOR PASTOR, YOUTH PASTOR, OR A CHURCH BOARD MEMBER COMPLETE THE FOLLOWING CERTIFICATION. CHOOSE SOMEONE WHO KNOWS YOU BEST. DO NOT USE SOMEONE WHO IS RELATED TO YOU.**

To be filled out by applicant: Name _____
Address _____
City, State, ZIP _____
Phone (____) _____ e-mail _____
Any criminal charges or convictions since last application? _____
Church you attend _____
Church Address _____
Name of Pastor _____
Applicants signature _____ Date _____
Witness _____ Date _____
(if applicant is a minor, the witness must be a parent or legal guardian)

To be filled out by the Pastor:

I approve/disapprove of _____ to work at ministry events
(Circle or Underline one) (Name of applicant)

sponsored by the NY. District or one of its fellowship sections. He/she was approved and has attended a previous event. He/she is in good standing with me and the church. To the best of my knowledge all the above is true.

Signature of Pastor _____

REFERENCE'S CERTIFICATION *(not a relative)*

I am personally acquainted with the applicant, and in my opinion he or she is competent and qualified to work with minors of any age. I know of no facts or allegations that raise any questions concerning his or her suitability for working with minors in any activity.

I prefer to discuss my response by telephone. I can be reached at the following number during the day _____ evening _____

I am: staff pastor ; church board member ; other .
(Please check one)

Legible signature
(must not be same person above)

This authorization is valid for one calendar year. From: _____ To: _____ **Revised 5/96, 1/02, 12/04, 11/05**

John A. Gingerich
Missions Coordinator
11495 Bullis Rd.
Marilla, NY 14102-9737