TRUMBULL CONGREGATIONAL CHURCH (TCC)
VOLUNTEER/TEACHER INFORMATION FORM

Name:_____ Date of Birth:_____

Address:_____

Cell Phone:_____

Email Address:_____

Daytime Phone:_____ Evening Phone: _____

Are you currently a TCC member?   Yes_____ No_____   If yes since:_____

I have been a friend of this church since: _____

Do you have your own transportation?   Yes_____ No_____

Do you have a valid driver's license?   Yes_____ No_____

Do you have current automobile insurance? Yes_____ No_____

Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)?   Yes_____ No_____

If yes, please describe _____

Are you available for periodic training sessions?   Yes _____ No_____

Please list two references (people who are not related to you by blood or marriage) and provide a complete address and phone information for each. *At least one reference should be a church member.*

1. Name _____

    Address _____

    Phone _____ Relationship to Reference _____

2. Name _____

    Address _____

    Phone _____ Relationship to Reference _____

_____   _____
          Signature of Applicant   *Date*

*Please complete the second page with your Social Security Number for the background check. We will shred it once the check has been completed.

TRUMBULL CONGREGATIONAL CHURCH (TCC)
BACKGROUND CHECK INFORMATION FORM

Name:_____ Date of Birth:_____

Address:_____

Cell Phone:_____

Email Address:_____

Daytime Phone:_____ Evening Phone: _____

Social Security Number:_____

_____   _____
Signature of Applicant   *Date*

By signing the above, you have given Trumbull Congregational Church the authority to request a background check based on the above information.

Please provide this form in a separate envelope to the Pastor.

Once the Background Check has been completed this form will be shredded.