

FIFTH AVENUE PRESBYTERIAN CHURCH
SUNDAY SCHOOL PROGRAM
TEACHER APPLICATION

Name: _____

Street: _____ City: _____ State: _____ Zip: _____

Daytime Telephone: _____ Evening: _____

E-mail: _____ Cell Number: _____

List names, relationships, and ages of people in your immediate family (if any):

Name	Relationship
------	--------------

How long have you been a member of FAPC? _____

Date joined church _____

Grade or age level which most interests you: _____

I will teach at 9:30 _____ 11:15 _____

Do you have a specialty?

Would you be interested in leading a rotation workshop utilizing your special skills? If so, please specify which interests you most:

Music/Dance _____

Drama/Puppetry _____

Arts/Crafts _____

Cooking _____

Video/Games _____

Other (please specify) _____

Describe your experience with children. Please include the names and addresses of any organizations where you have been involved with children.

What contribution(s) do you think you could make to FAPC children or youth?

Please complete back of this form.

List names and addresses of other churches you have attended regularly in the past 10 years. Did you work with children there?

References: (one should be a staff member or officer of FAPC and another should be personal)

Staff/Officer Name: _____	Personal Name: _____
Address: _____ _____	Address: _____ _____
Telephone: _____	Telephone: _____

Have you ever pleaded guilty to or been convicted of a crime other than a traffic/parking offense?

No Yes

If yes, please describe all convictions and arrests that involve children and all other convictions that occurred within the past five years:

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references, churches, or organizations listed in the application to give you any information (including opinions) that they may have regarding my character and fitness for children and youth work. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice.

I, _____, also hereby authorize, The Fifth Avenue Presbyterian Church to request a background check to release information regarding any record of charges or convictions contained in its files, or in its files, or in any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do release said company and FAPC from all liability that may result from any such disclosure made in response to this request. (Background check request form is separate document).

Should my application be accepted, I agree to be bound by the policies and standards of The Fifth Avenue Presbyterian Church, refraining from any physical punishment or improper sexual conduct in the performance of my services on behalf of the church. I further state that I have carefully read the foregoing release and know the contents thereof and sign this release as my own free act.

Applicant's signature: _____ Date: _____

Please mail completed application to:

Family Ministries
Fifth Avenue Presbyterian Church
7 West 55th St.
New York, NY 10019