



DIRECTOR APPLICATION and RELEASE FORM

Thank you for your interest in directing our church's Kids Hope USA program. Please review and complete this application and initial the responses in the commitment and release portion of the form to be considered for this position.

Overview: Role Description

A Kids Hope USA director facilitates life-changing relationships through a partnership between your church and your local elementary school. These relationships result in significant changes in a student's attitude, behavior and academic performance through the simplicity of love, hope and encouragement. A Kids Hope USA church director serves as the key contact with the school. The director provides supervision and support for volunteers while giving the school confidence that the program will be well run. The director will be representing Christ and the church to the school.

Kids Hope USA provides comprehensive online director training along with a personal coach to guide the director in learning to lead the church's program. Key director responsibilities include:

- Embracing the mission – Kids Hope USA builds life-changing relationships through the power of One: One Mentor, One Child, One Hour, One Church, One School.
- Recruiting volunteer mentors and prayer partners (with church leadership support) and ensuring all mentors are screened and trained according to Kids Hope USA guidelines.
- Working with the school to match mentors and students and communicating well with the school contact.
- Monitoring mentor-student relationships and keeping information organized.
- Sharing the vision and stories of God's amazing work in the lives of students and church volunteers.
- Ensuring the program is run according to the standards of Kids Hope USA.

Application Process

As part of the process, director applicants:

- Complete the Director Application including the Volunteer Pledge & Release.
- Participate in an interview.
- Complete and pass the screening process [background check and 3 references].
- Complete required training if selected as director.



DIRECTOR APPLICATION

Name: _____

Address: _____

Phone: _____ Email: _____

Driver's License #: _____ Sex: Male Female

Date of Birth: _____ How long have you lived at your current address? _____

Previous Address: _____

List all other states where you have lived as an adult. _____

Please list all previous volunteer work or employment involving children or students. List each organization's name and address, type of work, dates, and a contact person familiar with your work there. (Use the back of this page for more space, if necessary.)

Are you currently employed? If so, please list current employer: _____

Why do you want to serve as a director? _____

Please share talents and skills you bring to the position (skill examples: people, computer, administrative/organization, leadership): _____

Have you ever been convicted of, pled guilty to, or pled no contest to a crime other than a minor traffic violation?

Yes No

If yes, please explain: _____

Has someone ever accused you of physically or sexually abusing or molesting a child? _____



Best method to contact you: Phone. Email. Text

Please indicate the days and times you are generally available for meetings and being present at the school:

REFERENCES

Please list three references including:

- a professional reference,
- a personal reference,
- and a family member.

References must be over the age of 18 and have known you for at least a year. One reference should be a member of the opposite sex.

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship: _____ Length of Relationship: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship: _____ Length of Relationship: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship: _____ Length of Relationship: _____



VOLUNTEER PLEDGE AND RELEASE

My Pledge

I **commit** to the following statements (Please initial each of the following statements):

- I understand that my references and contacts from prior church or non-church work with children, students, or disabled adults will be contacted.
- I understand that I must be interviewed and receive pastoral approval before I begin service as a director in _____ Church's Kids Hope USA program.
- I understand that I can withdraw from the application process at any time.
- I understand and agree that any information received from the background check and application verification will not be disclosed to me except as required by law, and I hereby waive any right I may have to inspect any information provided about me by any person or organization identified by me on this form.
- I understand and agree that false statements regarding past conduct and/or present situations may be grounds for denial of this application to provide volunteer services, and that refusal to inform _____ Church of the contents of a sealed criminal record will result in the automatic denial of the application.

Personal Release

By initializing each section below,

- I declare that all statements contained in my application are true. I understand that any misrepresentation or omission is cause for dismissal from any ministry involvement. I authorize investigations of all statements contained in this application.
- I authorize _____ Church to contact all individuals, organizations and references listed on this Director Application Form in order to verify the information I have provided.
- I specifically authorize the church to undertake a criminal background check.
- I declare that I am not a pedophile or child molester. I have not perpetrated physical abuse, sexual abuse, emotional abuse or neglect against a child, student, or disabled adult, and I have never been accused of these acts.
- If accepted as director, I agree to read and abide by all Policies and Procedures provided to me by _____ Church.
- If accepted as director, I agree to read and abide by all Policies and Procedures provided to me by Kids Hope USA.
- I agree to release from liability any person or organization providing information related to me, including those persons I have listed as references, as well as contact persons from my previous volunteer work or employment with children.

By signing this form, I certify and affirm that the information I have given on this form is true, complete, and correct in all respects.

Signature: _____ Date: _____

<p>For Office Use Only</p> <p>I have reviewed this application and have noted any missing information.</p> <p>Screening Member Signature: _____ Date: _____</p>
