

REFERENCES:

List at least two (2) personal references. One (1) reference must be a person who knows in the context of Christian ministry/service. One (1) reference should be from a pastor, mentor or leader who has known you for at least one year.

Name of Reference & Relationship to you	Address/State/Zip	Phone	Email

Background Check

In completing this volunteer application, I understand, represent and agree that:

1. Acceptance of this completed Application by Ekballo Harvest (hitherto referred to as the Ministry) does not mean that a volunteer position for which I am qualified, is open or that the Ministry has agreed to allow me to volunteer. The Ministry is under no obligation to utilize my services as the result of accepting this completed application.
2. As part of the Ministry’s procedure for verifying the information provided by me on this form or evaluating me for volunteer purposes, the Ministry may contact persons, employers and/or organizations named by me in this form; conduct a national criminal background check; conduct a sex offender registry check; a social security trace or other appropriate background investigative reports which may include information gathered through personal interviews with third parties, family members, and persons, with whom I am acquainted. I consent to the Ministry making such checks and understand that this may include information regarding my character, general reputation, and personal characteristics. I further agree to sign any and all documents, consents and/or agreements which may be necessary for the church and its authorized representatives and/or designees to complete the above.

By signing this form, I authorize the Ministry to request and obtain the information described above. Further, I release the Ministry and its denominational agency, affiliates, related entities, agents, employees and officers (collectively “Church”) and all references from any claim or liability whatsoever arising out of such request or any information disclosed in response thereto, and I agree to hold the Ministry and all references harmless and will not bring any action or assert any claim against the Ministry or any reference on account thereof.

3. I understand that my providing of false or misleading material information or my failure to state material facts either in this form or in any interviews will result in the immediate rejection of my application as a volunteer with or immediate dismissal if such false or misleading information is discovered after any volunteer offer is accepted by me from the Church listed above.
4. During the application process and at any time during the tenure of my employment/service with Ekballo Harvest and Mosaic House of Prayer, I hereby authorize Ekballo Harvest to procure any necessary consumer reports and state clearances, which I understand may include information regarding my character, general reputation, or personal characteristics. This report may be compiled with the information from courts record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation or personal characteristics.

I have read and understand the above and affirm that the information I have provided on this application is true & correct.

Applicant’s printed name

Applicant’s signature

Date

Driver’s License Number/State: _____ **SSN:** _____

Statement of Liability and Waiver of Release

By signing below, I acknowledge that the prayer room is under 24/7 video surveillance and that I agree I am responsible for the careful stewardship of the assets belonging to Ekballo Harvest (the ministry) which are kept in the prayer room, including but not limited to misc. music equipment, tv, white board, and flags. In the event that damage is done while I am using the room, I acknowledge and agree to replace or compensate the ministry for any said damages.

By signing below, I HEREBY ASSUME ANY AND ALL RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH EKBALLO HARVEST, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

In consideration of my application and permitting me to participate in the ministry, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- A. I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: EKBALLO HARVEST, (the Ministry) and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers:
- B. INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise. I acknowledge that the Ministry and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I understand while participating in the ministry, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Name: _____ Name (print): _____

Date: _____

Statement of Accountability

By signing below, I acknowledge that in Ekballo Harvest's (the Ministry) attempt to create a spiritually and emotionally safe environment I will submit to pursuing wholeness, personal emotional/spiritual development, and/or deliverance and inner healing at least once a quarter contingent upon the request of the Ministry as a criterion to continue my volunteer service at the ministry. This can include but is not limited to acquiring biblical counseling (traditional, Christian psychology, sozo/inner healing/deliverance), seeking out professional therapy, and/or attending relevant conferences/retreats/seminars. I understand that refusal to pursue/maintain healthy emotional and spiritual well-being can result in a termination of my rights to volunteer with the ministry or use the prayer room.

Name: _____ Name (print): _____

Date: _____

<p>Ekballo Office Use Only This application was review by _____ on _____ Approved _____ Not approved (if so why?): _____ _____</p>
