

Winter Haven Christian School Chaperone Form for Overnight Field Trips and Events

Contact Information

Title _____ Name _____
Last
First
Middle

Address _____

Email Address _____ Home Phone _____

Work Phone _____ Cell Phone _____

Emergency contact person (name and phone number) _____

Names/grades of children at WHCS _____

References Please give three references with phone numbers and email addresses. Unless noted otherwise, we will assume permission to contact any or all of these individuals if a reference check is deemed necessary. References should not be relatives.

	Name	Phone	Email	Relationship to applicant	# Years Known
1.					
2.					
3.					

Church Information

Please list below the following information regarding your church involvement and membership. Unless noted otherwise, we will assume permission to contact your church office and church staff to verify the information provided and for an additional reference.

Church you attend _____ Denomination _____

Address _____ City _____ Zip _____

Phone # _____ Senior Pastor Name _____

Are you a member Yes No Do you attend most Sunday's Yes No

How long have you attended/been a member of this church? _____

Views and Values Please read the information on WHCS mission and doctrinal commitments, answer the questions and sign below where indicated.

MISSION STATEMENT

The purpose of Winter Haven Christian School is to assist parents in developing their children to be strong in mind, spirit, and body, using Christ as their example and teaching the principles found in God's Holy Word, the Bible.

PHILOSOPHY AND PURPOSE

Winter Haven Christian School's desire is to assist Christian parents in the education of their children. The school's goal is to build Christian character in each life without compromising academic excellence. Because the school is interdenominational, matters of denominational debate are avoided by the school, but strong emphasis is placed on teaching the Bible without compromise. If questions on denominational issues arise, students are referred to their parents or their pastors for answers. WHCS exists to assist Christian parents in leading their children to a personal relationship with the Lord Jesus Christ and promoting spiritual growth. It is also our purpose to prepare students academically, teach them to respect authority, and help them develop social skills by working in harmony with teachers and fellow students.

While a school has an enormous responsibility in educating students entrusted to them, the primary responsibility for the education of the child--both Christian and academic--rests with the parents. Without the interest, involvement and complete cooperation of the parents, a school is limited in the influence it can have in a child's life.

THEOLOGY

The Bible is taught from a conservative Protestant perspective, and, as much as possible, is integrated into all of the courses of study -- not just Bible class. WHCS does not hold one translation of the Bible to be superior above all others, but at times designates the use of certain translations for the purpose of uniformity.

STATEMENT OF FAITH

1. We believe the Bible to be the inspired and infallible, authoritative Word of God.
2. We believe in the Trinity: The Father, Son, and Holy Spirit.
3. We believe that Jesus is the Son of God. We believe in His Virgin birth, in His sinless life, in His miracles, in His atoning death through His death on the cross, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return to power and glory.
4. We believe in the resurrection of the saved to eternal life in heaven and the resurrection of the lost to eternal damnation in Hell.
5. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life.
6. We believe in the spiritual unity of believers in Christ.
7. We believe that salvation is by grace through faith and belief in the Lord Jesus Christ, and not by any works.
8. We believe that a Christian grows in his spiritual life by praying, reading and studying the Bible, and worshipping in a fellowship of Christian believers.

QUESTIONS

1. Are you in agreement with our Mission Statement; Philosophy and Purpose; Theology and Statement of Faith?
 Yes No (please explain)
2. Do you enjoy working with children? Yes No (please explain)
3. Do you understand that chaperones are not allowed to drink alcohol, smoke or exhibit other behavior that is contrary to the values of the school when chaperoning a field trip? Yes No (please explain)

I understand that filling out this application does not guarantee me a spot as a chaperone on an overnight field trip. I also understand that this application will be presented to the Board of Directors for final approval.

Name

Date

CONFIDENTIAL

Driver/Chaperone's Statement

In order to ensure the safety of WHCS students, it may be necessary for the school to conduct a background check on drivers/chaperones for overnight field trips. To assist us in this process, please answer the following question, provide the requested information, and sign and date the statement. Please read carefully before signing.

Have you ever been arrested, convicted, or pleaded guilty to a crime or any other offense involving drugs, alcohol, child abuse, sexual aberration, or moral turpitude? No Yes (*please explain*)

Chaperone's Full Legal Name: _____
Last First Middle Maiden

Date of Birth: _____

City, State, & Country of Birth: _____

Driver's License State & Number: _____ Issuing State _____
(*required*)

Social Security Number: _____
(*required*)

I affirm that the information contained in this form is true and complete to my knowledge. I authorize any references or other individuals listed in this form to provide Winter Haven Christian School any information (including opinions) that they may have regarding my character and fitness for working with children. I hereby release any individual, employer, reference, or any other person or organization, including record custodians, both collectively and individually from any and all liability for damages of whatever kind or nature in regard to their release of information. I waive any right I may have to inspect any information provided about me by those identified on this form.

I authorize that a Criminal Records Check for an arrest and/or conviction record be conducted on me and that any information that pertains to any record of arrests and/or convictions contained in police files or any criminal file maintained on me, whether federal, state, or local, be released to Winter Haven Christian School. In so authorizing, I release any police department and Winter Haven Christian School, its employees and agents, and those individuals receiving the results of the check, from any and all liability resulting from such disclosure.

Signature

Date

For Office Use

Background Check Level: _____

Division _____ Director's Initials _____ Date of Check _____