



Sewickley Presbyterian Church
LIVE · GROW · SERVE
 414 Grant Street | Sewickley, PA | 15143
 www.sewickleypresby.org

VOLUNTEER SCREENING FORM

First Name	Middle Name	Last Name
Maiden Name and/or Aliases	Social Security Number	Date of Birth (MM/DD/YYYY)
PA Driver License Number	Gender	Home Address
Home Phone Number	Are You A Current Member of SPC? (circle correct answer)	Email
Cell Phone Number	Y or N	

By signing this volunteer form, you are consenting to permit the church to perform background checks at its discretion and that you have read and agree with our Statement of Purpose and Procedure Safeguarding the Well-Being of Children and Youth.

Signature

Date

Please print your name