Appendix C - Application for Ministry with Children & Youth

Name:					
Address:					
Phone #s: (home)	(work)	(cell)			
E-mail Address					
Social Security #					
Emergency Contact					
Phone #					
Name and relationship					
Occupation					
Current job responsibilities and schedule:					
Employment History (incluadd additional pages as need	•	or employers for the past ten years			
ada adamonai pages as nece	icu)				
Company name:					
Position held:					
Name of Supervisor and Pho	ne #				
Dates of employment: from_		to present			
Company name:					
Position held:					
Name of Supervisor and Phoi	ne #				
		to			
Reason for leaving position:					
Company name:					
Position held:					
Dates of employment: from_					
Reason for leaving position:					

Current and previous volunteer experience (include present and past experience for the past ten years – add additional pages as needed)

Organization:	
Duties:	
Name of Supervisor and Phone #	
Dates: from	to
Organization:	
Duties:	
Name of Supervisor and Phone #	
	to
Organization:	
Duties:	
Name of Supervisor and Phone #	
	to
Special interests, hobbies, and skills	S:
In what ministries with adults do yo	ou envision engaging?
	nistries?
What personal qualities, training ar ministries ?	nd/or skills do you have that would help you in thes

Would you be available for periodic training sessions? Yes No

Keeping God's People Safe: Prohibition of Sexual Harassment & Exploitation

The Diocese of Iowa prohibits sexual harassment of Church Personnel by anyone (including supervisors or decision-makers, co-workers, consultants, vendors and other non-employees). The behavior of individuals engaging in such conduct, or supervisors or decision-makers who knowingly allow such behavior to continue, will not be tolerated. The Diocese of Iowa does not tolerate sexual exploitation in any form. Sexualexploitation is the development or attempted development of a sexual relationship between a person in any ministerial position, lay or ordained, and an individual with whom he or she has a Pastoral Relationship.

References: (Please provide three character references - other than family members - who can identify your strengths and weaknesses and describe your background and ability to relate with adults.)

1. Name	
Address	
Home/ work/ cell phone #s	
How does this person know you?	
2. Name	
Address	
Home/ work/ cell phone #s	
How does this person know you?	
3. Name	
Address	
Home/ work/ cell phone #s	
How does this person know you?	

Please answer the following questions. (If any of your answers are yes, please attach another page and write a full explanation.)

- Yes No 1. Have you, at any time, been involved in or accused, rightly or wrongly, of sexual abuse, neglect or mistreatment (emotional or physical) of children or youth?
- Yes No 2. Have you, at any time, been involved in or accused, rightly or wrongly of sexual harassment or sexual exploitation?
- Yes No 3. Have you ever been accused or convicted of possession/sales of controlled substances or of driving under the influence of alcohol or drugs?
- Yes No 4. Are you using illegal drugs?
- Yes No 5. Have you ever been arrested or convicted for any criminal act more serious than a traffic violation?
- Yes No 6. Have your ever had a paraphiliac diagnosis (pedophilia, exhibitionism, or voyeurism)?
- Yes No 7. Have you ever been asked to step away from ministry in any setting, paid or volunteer?
- Yes No 8. Is there anything in your past or current life that might be a problem if we found out about it later?

Acknowledgment, Release, and Signature

To the best of my knowledge, the information contained in this application is complete and accurate. I understand that providing false information is grounds for not hiring me or choosing me for a volunteer position or for my discharge if I have already been hired or chosen. I authorize any person or organization, whether or not identified in this application, to provide any information concerning my educational, employment, volunteer, driving, criminal record, sexual registry or other qualification for my employment or volunteering. I also
authorize (congregation) to request and receive such information. In consideration of the receipt and evaluation of this application by the Church, I
hereby release any individual, church, youth organization, charity, employer, supervisor,
reference, or other person or organization, including records custodians, from any and all
liability for damages of whatever kind or nature that may at any time result to me, my heirs of family, because of compliance or any attempts to comply, with this authorization. I waive any
right that I may have to inspect any information provided about me by any person or
organization identified by me in this application. If hired or chosen, I agree to be bound by the
Diocese of Iowa Policies and Procedures Concerning Sexual Boundaries. I have been given and
have read a copy of these Policies & Procedures. If I violate these Policies and Procedures, I
understand that my volunteer status may be terminated. I state that I HAVE CAREFULLY REAL THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE
AS MY OWN ACT. This is a legally binding document, which I have read and understand.
X
Signed
Print name
Date
XWitness Signature & Date

Witness Signature & Date X	
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