

**Screening Form and Application for Religious Educators,  
Youth Group Staff and Volunteers**

Thank you for your interest in working with the children and youth of our congregation. Our congregation takes seriously our responsibility of assuring the safety of our youth. Please fill out this form and give it to the Director of Religious Education. We appreciate your support in providing a safe and secure environment for all of the congregation's children and youth.

NAME:

---

First

Middle

Last

Have you ever used a different name? \_\_\_No \_\_\_Yes

If yes, please list with dates:

How long have you been attending this congregation? \_\_\_\_\_

ADDRESS:

---

Street

---

TOWN

STATE

ZIP

Number of years at your current address: \_\_\_\_\_

If you have not lived at this address for at least 5 years, please list any previous addresses with dates.

In what states have you lived in since you were 18 years old?

Home phone\_\_\_\_\_

Work phone\_\_\_\_\_

Place of work\_\_\_\_\_

Number of years at current employment\_\_\_\_\_

If you are currently unemployed do you do volunteer work in the community?

\_\_\_\_\_yes \_\_\_\_\_no

If yes, please list:

May we call your employer or volunteer coordinator for a character reference?

\_\_\_\_\_yes \_\_\_\_\_no

If not, please tell us why:

A. Have you ever been convicted of any criminal offense? If yes, please explain.

B. Have you ever been accused of any crimes against a person, including rape, incest, sexual exploitation or a minor, or sexual or physical assault or neglect of any person regardless of age?

If yes, please provide details:

C. Have you ever resigned from employment or been disciplined or terminated by any employer for reasons related to sexual misconduct of child abuse or neglect?

If yes, please provide details:

D. Have you ever been convicted of any crimes against a person, including rape, incest, sexual exploitation of a minor, or sexual or physical assault or neglect of any person regardless of age?

If yes, please provide details:

E. Other than the above, is there any fact of circumstance involving your or your background that would call into question your being entrusted with the supervision, guidance, and care of children and youth?

If yes, please provide details.

## Congregation History and Prior Work with Children and Youth

List congregations you have attended during the past five years.

Name of congregation(s): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Attended from: \_\_\_\_\_

List all previous work involving children and youth (list name, type of work performed, person to whom you reported)

List any gifts, callings, training, education or other factors that have prepared you for work with children or youth:

Personal References (3): Please do not include anyone related to you.

1. Name:

Home Address:

Phone number and email address:

*For interviewer's use:*

*Reference check completed* \_\_\_\_\_

*Positive response* \_\_\_\_\_

*Negative response* \_\_\_\_\_

*Explanation:*

2. Name:

Home Address:

Phone number and email address:

*For interviewer's use:*

*Reference check completed* \_\_\_\_\_

*Positive response* \_\_\_\_\_

*Negative response* \_\_\_\_\_

*Explanation:*

3. Name:

Home Address:

Phone number and email address:

*For interviewer's use:*

*Reference check completed* \_\_\_\_\_

*Positive response* \_\_\_\_\_

*Negative response* \_\_\_\_\_

*Explanation:*

I authorize the congregation to contact references and other congregations to obtain information about my background regarding my character and fitness for work with children and youth. I authorize references to provide such information about me. I hereby release and hold harmless from, liability any person or organization that provides information. I also agree to hold harmless this congregation, its trustees, employees and volunteers.

Further, I understand that a member of the staff may check the sex offender registry and/or contact the local police for more information about my background.

This information will be available only to those responsible for screening staff or volunteers or participating in a response team, or as required by law.

I attest that the above information is true and correct.

---

Signature

Date:

*Note: This application was adapted from The Ohio-Meadville District Child and Youth Protection Procedures, May 2004 and "Balancing Acts: Keeping Children Safe in Congregations" by Rev. Debra W. Haffner.*