Community of Christ

Children and Youth Worker Confidential Application

This application is to be completed by all people wishing to serve in **any** position with the Community of Christ that involves direct contact with children or youth. The intent of this application is to help the church provide a safe and secure environment for young people who participate in ministry and to assist applicants and church leaders in identifying and utilizing gifts and skills of the applicant.

| Date of Application: | | ate of Birth: | | |
|---|---------------------------|------------------------|---------------------------------|--|
| (*Please ensure submission is no lo | onger than 6mths from c | ompletion date) | | |
| Full Name: <i>(Last)</i> | (First) | (Middle) | (Other) | |
| Present Address: | | | | |
| City, State/Province: | Zip/Postal Code: | | | |
| Telephone Contact (Include Area Code |): | | | |
| Have you ever been convicted of a | crime other than a mino | r traffic violation? | 🗌 Yes 🗌 No | |
| If yes, please indicate the date and | nature of the offense. | | | |
| Have you ever been or are you currently under investigation by the Department of Social Services (or any equivalent department/agency) for child abuse and/or neglect or any criminal activity involving a minor? | | | | |
| If yes, please indicate the date and | nature of the record. | | | |
| I understand that the church will con previous questions, and I give my p | | | ered "yes" to either of the two | |
| Name of congregation/church when | e you regularly attend: _ | | | |
| Is this a Community of Christ congr | egation? 🗌 Yes 🗌 No | Current Pastor: | | |
| Pastor's Phone: | Ра | astor's E-mail: | | |
| List the name, city, and state/provin years. | | • | regularly during the past five | |
| List previous experience working wi | ith young people. | | | |
| | | | | |
| List any gifts, training, education, or | other factors that have | prepared you for child | Iren and youth ministry. | |

Personal References

No relatives please / If applicant is not affiliated with Community of Christ for more than 6months please consult administrator

| Reference #1 Name: | | Reference #2 Name: | |
|-----------------------|-------------------|-----------------------|-------------------|
| Address: | | Address: | |
| City: | | City: | |
| State/Province: | _Zip/Postal Code: | State/Province: | _Zip/Postal Code: |
| Telephone: | | _ Telephone: | |
| E-Mail: | | E-mail: | |
| Reference #3 Name: | | - | |
| Address: | | - | |
| City; | | _ | |
| State/Province: | _Zip/Postal Code: | _ | |
| Telephone: | | _ | |
| E-mail: | | _ | |

Applicant's Statement

I authorize any references or organizations listed in this application to give you any information they may have regarding my character and fitness for children and youth work. I release all such references from liability for any damage that may result from furnishing such evaluations to you, and I waive any right to inspect references provided on my behalf.

Should my application be accepted, I agree to be bound by the rules and regulations and policies of the Community of Christ, and to act in accordance with those, in the performance of my services on behalf of the church.

I hereby attest and certify that I have never been convicted of nor pled guilty to: child abuse, endangering children, gross sexual imposition, sexual imposition, voyeurism, public indecency, any offense of violence, or any existing or former offense of any municipal corporation, any state, United States, or any other nation that is substantially equivalent to any of the above offenses. (If you have been convicted of or pled guilty to any of the above offenses and wish to explain the circumstances therof, please do so on a separate sheet.) I further certify that I have never been discharged from employment or a volunteer position because of any activity covered by the foregoing.

I hereby authorize any present or former employer, person, firm, corporation, physician, or government agency to answer any and all questions and to release or provide any information within their knowledge or records, and I agree to hold any and all of them harmless and free of any liability for releasing any truthful information that is within their knowledge and records. I further authorize the Community of Christ to conduct a check of my police criminal records and agree that I will fully cooperate in providing all information and signing all documents necessary to conduct such a check.

I hereby attest and certify that the above information provided by me is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may disgualify my application or result in my immediate dismissal if I am already serving in a children- and youth-related position.

| Applicant's Signature | Date: |
|----------------------------|-------|
| Parent/Guardian Signature* | Date: |

Please submit this form to your Community of Christ pastor or other appropriate jurisdictional officer for processing.

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Record of Contact with Children and Youth Workers Applicant's References: Confidential Information: All sections <u>must</u> be completed

| First Reference Applicat | nt's Name | | | |
|---|--|--|--|--|
| Person contacted: | | | | |
| Friend/member/otherDate: Method of contact: | Length of time applicant known (Must be more than 6 months) | | | |
| Name of person making contact: | | | | |
| Reference's comments about applicant were favorable guarded unfavorable | | | | |
| Summary of reference's comments: | | | | |
| Second Reference | | | | |
| Person contacted: | | | | |
| Friend/member/other Date: | | | | |
| Method of contact: Telephone Letter Other | (Must be more than 6mths) | | | |
| Name of person making contact: | | | | |
| Reference's comments about applicant were 🗌 favorable | le 🗌 guarded 🗌 unfavorable | | | |
| Summary of reference's comments: | | | | |
| Third Reference | | | | |
| Person contacted: | | | | |
| Friend/member/other Date: Method of contact: Telephone Letter Other | Length of time applicant known (Must be more than 6mths) | | | |
| Name of person making contact: | | | | |
| Reference's comments about applicant were 🗌 favorable 🔲 guarded 🔲 unfavorable | | | | |
| Summary of reference's comments: | | | | |
| Signature of person filing this report | Date: | | | |
| Print name | Title: | | | |

Community of Christ

Statement of Personal Interviewer Confidential Information

All children and youth worker applicants must be interviewed by the appropriate church officer, or the person designated to do so by that officer. Before the interview, the interviewer needs to review the Application and the applicant's Record of Contact. The following questions are examples of questions that should be included in the interview.

- What do you feel are your strong points as a children and youth worker?
- What do you feel are your weak points?
- What experience have you had working with young people?
- Summarize your experience with the church.
- How do you feel about receiving training that will help you become a more effective worker?
- Why do you want to be a children and youth worker?
- Describe your involvement in church children or youth programs as you were growing up.
- As you were growing up, did you face any problems that you feel may impact your ministry?
- How do you and your family feel about giving the necessary time to children or youth work?
- How do you feel about being a role model for young people?

| I have interviewed | and reviewed the references. | |
|---|------------------------------|--|
| ☐ <i>I recommend</i> . To the best of my knowledge I find the applicant to be of good character and to possess the qualities needed to serve as a children and youth worker in the Community of Christ. | | |
| ☐ <i>I cannot recommend</i> this individual as a children and youth worker in the Community of Christ. | | |
| Comments: | | |
| Interviewer's signature | Date: | |
| Print interviewer's name | | |

Community of Christ

Statement of Church Officer Confidential Information

I have reviewed the Application, Record of Contact, and Statement of Personal Interviewer for

| Applicant's Name | | | | |
|--|---------------|--|--|--|
| ☐ <i>I recommend.</i> To the best of my knowledge I find the applicant to be of good character and to possess the qualities needed to serve as a children and youth worker in the Community of Christ. | | | | |
| □ <i>I cannot recommend</i> this individual as a children and youth worker in the Community of Christ. | | | | |
| * Signature of Church Officer (may / may not be as previous) | Date: | | | |
| Print Name | Phone Number: | | | |
| Designation: | E-mail: | | | |
| Address of Church Officer: | | | | |
| City/State or Province/Zip or Postal Code: | | | | |
| Nation: | | | | |
| Approved by Mission Center President or Mission Center Financial Officer (*signature required, even if it is the same person as above) | | | | |
| Signature | Date: | | | |
| Mission Center: | | | | |
| | | | | |

*Best practice dictates different officers if possible.