

### The Diocese of Florida

# EMPLOYEE & VOLUNTEER APPLICATION FOR CHILDREN AND YOUTH WORKERS

## **CONFIDENTIAL**

This application is to be completed by **all** applicants for **any** position (volunteer or compensated) supervision or custody of minors on a regular and on-going basis). It is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities.

**CONFIDENTIAL:** All information on this application is treated as confidential. The person(s) who are responsible for interviewing the applicant will have access to this information. Those persons may include, but are not limited to priest, program or agency director/coordinator, school principal, or search committee members. If mailing, mark your envelope "Confidential." Please attach additional pages, if necessary, when answering all questions fully and accurately.

This document is to be kept in the employee's/volunteer's personnel file in a locked file drawer.

### PERSONAL INFORMATION

Γoday's Date	Birth Date			
Name:				
Name:Last  Identity must be confirmed with	First h a state driver's license or other official photographic identification)		Middle  identification)	
			•	
Present Address:	Stree	et/Apt. #	<del></del>	
City:	State:	Zip Code:		
Home Phone: ()	Social S	Security #		
Name and location of all education stitution	onal institutions in which Add	·	Degree/Date	
			2	
Have you ever been convicted of YesNoIf yes,			me?	
			bation, had adjudication withheld, or entered xplain:	
Have you ever been convicted of	child abuse or a crime in	volving actual or attempted s	exual molestation of a minor?	

Has any charge, claim, or complaint ever been made that you engaged in inappropriate sexual behavior:  YesNoIf yes, please explain:
Were you a victim of abuse or molestation while a minor? YesNo(You may discuss your answer in confidence with the interviewer)
CHURCH HISTORY AND PRIOR YOUTH WORK
Name and address of church of which you are a member
How long have you been a member?
List names and addresses of other churches you have attended regularly during the past 7 years:
List all previous work experience including work 'with children and youth (full or part-time). Begin with most recent employe
From: EMPLOYER NAME
To:
From:
To:
List any gifts, experiences, training, education, or other factors that have prepared you for work with children:
Have you ever had any license or certificate (e.g., professional) suspended or revoked?
Yes No If yes, please explain:
Have you ever had a Driver's License revoked or suspended? YesNoIf yes, please explain:

Have you ever been arrested for a DWI (driving while into and when each such charge(s) was made, and describe the When?: Where?	outcome:	
Outcome?:		
What age of children and youth work do you prefer to be v	working with	
On what date would you be available?		
Minimum length of commitment?		
Is there any fact or circumstance about you or your backgr supervision, guidance, and care of children and/or youth?_	round that would call into	o question the advisability of entrusting you with th
Do you have any special requirements of which we should participate in outdoor activities, etc.)		
PERSONAL A	AND WORK REFE	RENCES
Personal References not former employers or relatives: NAME	ADDRESS	PHONE
Most recent employers: NAME		

### APPLICANT'S CERTIFICATION AND RELEASE

I hereby certify that all of the facts and information listed on this application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. Under penalty of perjury, I swear or affirm that the information contained in this application complete and correct.

I hereby authorize this church or agency of the Diocese of Florida to investigate all statements contained in this application, interview the references and previous employers listed in this application, and to obtain a credit report from a consumer reporting agency to be used for employment purposes in accordance with the Fair Credit Reporting Act.

I herby authorize the references and previous employers listed to give all facts, opinions and evaluations concerning my previous employment, and any other information they may have, personal or otherwise, and I release all such parties from any liability which may allegedly arise from furnishing such information including, but not limited to, any liability for defamation or invasion of privacy.

I understand and agree that a complete background investigation may be conducted with respect to me and I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and

fitness for children and youth work. Inconsideration of the receipt and evaluation of this application by the Diocese of Florida, its congregations, and agencies, I hereby release any individual, church, youth organization, charity, 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 which may at any time result to me, my heirs, or family, on account 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.

I also understand that, if I am offered employment, I will be required to serve a ninety (90) day probationary period. I further understand that my employment and compensation can be terminated, with or without cause or notice, at anytime, regardless of the successful completion of my probationary period, at the option of either the Diocese, church, agency, or myself.

I further understand that, if I am given an offer of employment, it will be conditioned on satisfactory results of a background investigation and/or a medical examination or inquiry (including a drug screening test). I further understand and voluntarily agree, as a condition of employment or my continued employment, that I may be requested to submit to a urinalysis or other drug screening test, and that my failure to take such test(s) when requested to do so or unsatisfactory results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal.

Should my application be accepted, I agree to be bound by the Canons, Policies and Procedures of the Diocese of Florida and, its congregations, and agencies in the performance of my services on behalf of the church.

I further state that I HAVE CAREFULLY READ THE FOREGOINGRELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

Appicant:		Witness:	
	Signature	Signature	
Date:			

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