# Community of Christ

## **Children and Youth Worker Confidential Application**

This application is to be completed by all people wishing to serve in <u>any</u> 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:(*Please ensure submission is no	Date of Bir longer than 6 months from complete	th: etion date)	
Full Name: <i>(Last)</i>	(First)	(Middle)	(Other)
Present Address:			
City/State:	Zip:		
Telephone Contact (Include Area Co	de):		
Have you ever been convicted of	a crime other than a minor traffic v	violation?	☐ Yes ☐ No
If yes, please indicate the date an	nd nature of the offense.		
	urrently under investigation by the or child abuse and/or neglect or any		
If yes, please indicate the date an	nd nature of the record:		
I understand that the church will operations of the previous questions, and I give my	contact the appropriate agencies if permission for them to do so.	I have answered "yes	" to either of the two
Name of congregation/church who	ere you regularly attend:		
Is this a Community of Christ con	gregation? 🗌 Yes 🗌 No Current	t Pastor:	
Pastor's Phone:	Pastor's E	mail:	
List the name, city, and state of o	ther congregations you have atten	ded regularly during th	ne past five years.
List previous experience working	with children/youth.		
List any gifts, training, education,	or other factors that have prepared	d you for children and	youth ministry.

#### **Personal References**

(3 References are required)

### Reference #1 (Please print) Name: Phone: City/State/Zip: Address: Email: Reference #2 (Please print) Phone: Name: Address: City/State/Zip: Reference #3 (Please print) Name: \_\_\_\_\_ Phone: City/State/Zip: \*\*References cannot be related by birth OR marriage. \*\*If you have not been affiliated with Community of Christ for more than 6 months, please ensure at least one reference is: a) pastor of the church you do attend, b) Community of Christ member who has known you for longer than 12 months, or c) a community leader where you live (examples: school principal/dean, doctor, employer, etc.). **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 thereof, 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 disqualify 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 appropriate jurisdictional officer for processing.

\*if applicant is under 18 years of age



#### **Record of Contact with References**

Confidential Information: All sections must be completed!

	Applicant's	Name	
Reference #1			
Person contacted:			
Friend/member/other:	Date:	Length of time applicant known	
Method of contact:	Letter	(Must be more than 6 months)	
Name of person making contact:			
Reference's comments about applica	nt were   favorable	guarded unfavorable	
Summary of reference's comments:_			
Reference #2			
Person contacted:			
Friend/member/other:	Date:	Length of time applicant known	
Method of contact:	(Must be more than 6 months)		
Name of person making contact:			
Reference's comments about applica	nt were  favorable	guarded unfavorable	
Summary of reference's comments:_			
Reference #3			
Person contacted:			
Friend/member/other:	Date:	Length of time applicant known	
Method of contact:   Telephone	Letter 🗌 Other:	(Must be more than 6 months)	
Name of person making contact:			
Reference's comments about applica	nt were   favorable	☐ guarded ☐ unfavorable	
Summary of reference's comments:_			
Signature of person filing this report:		Date:	
Printed name:		Title:	



#### **Statement of Personal Interviewer**

Confidential Information

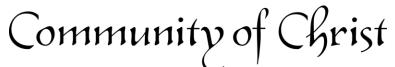
All children and youth worker applicants must be interviewed by the appropriate church officer or the person designated to do so by that officer.

Before the applicant's interview, the interviewer needs to review the application and the applicant's record of contact with references (Refer to page 2).

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 application qualities needed to serve as a children and youth worker in the contract of the contract				
☐ <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:	_ Title:			



# Statement of Church Officer Confidential Information

I have reviewed the application, record of contact, and statement of personal interviewer for: Applicant's Name I recommend. 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 cannot recommend this individual as a children and youth worker in the Community of Christ. Signature of Church Officer (May or may not be same person as previous pages. Best practice dictates different officers if possible.) Phone Number: \_\_\_\_ Printed Name Email: Address of Church Officer: City/State/Zip: Nation: United States of America Approved by Mission Center President or Mission Center Financial Officer (\*Signature required, even if it is the same person as above) Date: Signature

\*Fully completed <u>and signed</u> forms should be submitted to: Gayla Burgess, CVNMC Admin Assistant 3361 Quail Trail Ct, Marion, IA 52302 / gaylacofc@gmail.com

Printed Name

Mission Center: Cedar Valley-Nauvoo USA Mission Center