

**Unitarian Universalist Fellowship of Pottstown
Application Form for Child and Youth Workers**

This application is to be completed by all applicants for any position involving interactions with minors. The purpose of this form is to help UUFP provide a safe and secure environment for the children and youth that participate in programs sponsored by the church. Any information you provide here will be used solely for the purpose of determining your qualifications for working with minors.

Date: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home phone: _____ Other phone: _____

Employer: _____

Work phone: _____ E-mail: _____ Fax: _____

Church History and Prior Work with Children and/or Youth

Are you a member of UUFP? yes no

Length of time associated with UUFP _____

Please list any other congregations you have attended regularly in the past 3 years:
Name of Congregation City and State Dates of Attendance

Please list previous church and non-church work involving children and/or youth:

Please share information on your talents, callings, training, education, gifts or other resources that you can share with the children and youth at UUFP:

Please describe the reasons you are interested in this position:

Have you ever been charged or convicted of a criminal offense related to actual or attempted sexual misconduct or molestation of a minor, or of child abuse?

yes no If yes, please explain:

Has any civil judgment ever been made against you for reasons related to sexual misconduct or child abuse?

yes no If yes, please explain:

Have you ever resigned from employment or been disciplined or terminated by an employer because you were accused of sexual misconduct or child abuse?

yes no If yes, please explain:

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

yes no If yes, please explain:

Applicant's statement:

The information contained in this application is correct to the best of my knowledge. I understand that the information I have provided may be verified, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me. I agree to complete the PA Request for Criminal Record Check and the PA Pennsylvania Child Abuse History Clearance.

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 work with children or youth. I hereby release and agree to hold harmless from liability any person or organization that provides such information. I also agree to hold harmless UUFP, the Board of Directors, its employees and volunteers in their implementation of this policy.

I have read and agree to be bound by this Child and Youth Protection Policy of UUFP, including the code of ethics. I understand that any information obtained about me through this application process will be kept in the strictest confidentiality among appropriate members of UUFP who will be screening applicants for compensated or volunteer positions. Any information obtained through this process which indicates that I may lack, in UUFP's opinion, the maturity or temperament to work with children or youth, will be sufficient grounds for denying this application.

Signature: _____ Date: _____

Attachments:
Pennsylvania State Police Request for Criminal
Record Check: _____
Pennsylvania Child Abuse History
Clearance: _____

For Church Use Only:
Application Reviewed by:

Date: _____