



Screening Form

Parish/ School: **St. Elizabeth Ann Seton**

City: **Plano**

This application is to be completed for all applicants for any position (volunteer* or compensated). This is not an employment application. Persons seeking employment will be required to provide additional information. This process is used to help the church provide a safe and secure environment for children, youth and adults who participate in our program and use our facilities.

Personal

Name _____
Last First Middle

Address _____
City State Zip

Phones: () _____ () _____ () _____
Home Cell Work

Email Address _____

Employer _____

Emergency Contact _____ Phones: _____
Home Cell

Ministry _____	Friends on the Journey _____	ACTS _____
Children _____	Youth AAAAA _____	Ushers _____
Staff _____	Visitation Ministries AAAAA _____	Scouts _____
EM's _____	Meals and Rides AAA _____	RCIA _____
Stephens Ministers _____	Love Truck _____	Other _____

Are you a registered member of the parish? Yes Since _____ No

List all other churches you have attended or been involved with during the last five years:

Church	Address	Involvement	From	To

*Volunteer means any unpaid person engaged in or involved in a Diocesan activity, and who is entrusted with the care and supervision of children, and/or persons engaged or involved in ministry who have regular individual contact with the elderly or disabled.

List any skills, talents, education, training or experience that qualifies you for the position you are seeking, including professional license or certification:

List three personal references you have known three years or more. (not relatives or former employers)

1. Name: _____
Address: _____ Daytime Phone _____
City _____ State _____ Zip _____

2. Name: _____
Address: _____ Daytime Phone _____
City _____ State _____ Zip _____

3. Name: _____
Address: _____ Daytime Phone _____
City _____ State _____ Zip _____

List your City, State, County and dates of residence for the past five years

City	State	County	Dates

Because the Diocese of Dallas cares for our children, youth and adults and desires to protect them, we ask you to please answer the following questions. We understand the following questions are personal and we will take all reasonable precautions to protect your privacy.

Are you presently abusing alcohol or using any illegal drugs?

Yes No

Have you ever been convicted of, pleaded guilty or no contest to, placed on probation for, given probation, given community supervision, or given deferred adjudication for a crime or are you now under charges for any criminal offense?

Yes No

Answering yes to these questions will not automatically exclude you from the program but please explain fully---attach a separate page if necessary.

Volunteer/ Applicant Statement - Read Carefully!

- The information contained in this application is correct to the best of my knowledge.
- I understand that all criminal background checks will be treated as confidential.
- I understand and authorize the access to any and all information and records relating to my criminal history or criminal offenses committed or alleged, arrests, alleged criminal acts and criminal offenses committed.
- I understand and authorize any references, or any other person or organization, whether or not identified in this application, to give any information (including opinions) regarding my character and fitness for service.
- I hereby release any reference contact, whether identified or not in this application, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs/family, on account of compliance with this authorization, excepting only the communication of knowingly false information.
- I am aware that background checks may be updated periodically
- If a disqualifying offense is found on a criminal background check, there is an appeal process in the Safe Environment Program. I understand that this process allows me to verify information and correct any errors.
- I have carefully read this release and know the contents. I sign this release as my own free act. This is a legally binding release, which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of this authorization shall be as valid as the original.

(Applicants for a **paid position**: Do NOT fill in Date of Birth)

Date of Birth_____

Place of Birth_____

Driver License Number_____

State_____

Name_____ (Printed)

Social Security Number_____

Signature:_____

Date:_____

cc: Accutrak

The Catholic Community of St. Elizabeth Ann Seton

OVER

ACKNOWLEDGMENT

This Safe Environment Program Manual has been prepared as a guide to assist you when working with minors and vulnerable adults in the Diocese of Dallas. The information contained in this manual establishes guidelines only and should not be construed in any way as a contract of employment or continued employment. The Diocese and/or Parish reserve the right to make changes in the content or application of this manual and to implement those changes with or without notice.

I have received a copy of the Safe Environment Program Manual for the Catholic Community of St. Elizabeth Ann Seton, which includes Diocesan Policies on Sexual Harassment, Sexual Misconduct and Code of Conduct. I understand it is my responsibility to become familiar with and adhere to, the policies and procedures contained therein. I understand that this booklet is the property of the Diocese of Dallas.

Signature

(Last Name, First Initial)

Date