

VII. APPENDIX A

FUUSA APPLICATION FOR RELIGIOUS EDUCATORS & YOUTH GROUP LEADERS

Thank you for your interest in working with the children/youth at FUUSA. Our congregation takes seriously our responsibility to promote the safety of minors in our community.

Please complete this form and return it to the Director of Religious Education. Thank you for your support in promoting a safe environment for the congregation's children and youth.

Name:

First: _____

Middle: _____

Last: _____

Have you ever used a different name? No () Yes ()

If yes, please list with dates: _____

If you have security concerns over sharing information about use of a different name, please mark this space ___ and someone on the Safe Congregation Response Team will contact you.

Length of time attending FUUSA:

Under 6 Months ()

1-2 Years ()

5-10 Years ()

6-12 Months ()

2-5 Years ()

Over 10 Years ()

Please list any other congregations you may have attended during the past five years

Contact Information:

Street: _____

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Town, State, Zip: _____

Number of years at current address: _____

Home phone: _____

If you have not lived at this address for at least five years, please list the other addresses you have lived at in the last five years on the back of this form.

History

Have you ever been convicted of or pled guilty to any criminal offense against a minor?

No () Yes () If yes, please explain: _____

Please list two references, who are not relatives who have known you for at least three years, especially regarding your experience with children and youth:

Name: _____

Phone: _____

Address: _____

Name: _____

Phone: _____

Address: _____

Attestation:

My signature below indicates that I attest to the following:

- The above information is true and correct.
- I authorize the congregation to contact references and other congregations to obtain information about my background. I authorize references to provide information

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about me. I hereby release and hold harmless from liability any person or organization that provides information. I also agree to release and hold harmless this congregation, its trustees, employees and volunteers.

- I understand FUUSA will conduct national sex offender registry check for Level Two and Level Three offenses using the information I've provided herein.
- I may be asked to provide additional information and that, while it is my right to decline to provide such information, failure to do so may render me ineligible to teach RE or lead Youth Group.
- I understand that this information will be held in confidence and will only be available to those responsible for screening staff or volunteers or participating on the response team.

Signature: _____ Date: _____