

Name _____

In what ministry/ies will you be working/volunteering?

School	<input type="checkbox"/> Parent	<input type="checkbox"/> Grandparent	<input type="checkbox"/> Employee	<input type="checkbox"/> Other _____
Parish	<input type="checkbox"/> Religious Ed	<input type="checkbox"/> VBS	<input type="checkbox"/> Employee	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Youth Ministry	<input type="checkbox"/> Scouts	<input type="checkbox"/> CYO Coach	
Religious	<input type="checkbox"/> Priest	<input type="checkbox"/> Deacon	<input type="checkbox"/> Seminarian	<input type="checkbox"/> Religious Sister
Other	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Employee	<input type="checkbox"/> Other _____	Entity _____

IMPORTANT: PLEASE READ EACH QUESTION BEFORE ANSWERING

1. Has a civil or criminal complaint ever been filed against you alleging sexual misconduct or child abuse by you or your participation in or facilitation of such activities (including internal complaints given to management or supervisors at places of employment)? Yes No

If yes, explain in full (attach a separate sheet of paper if necessary). Please provide the date, nature and place of the incident leading to the complaint; where the complaint was filed; disposition of the complaint; and identify, by name and title, the person(s) who investigated the complaint.

2. Have you ever chosen not to renew or continue any employment or volunteer services, had your employment or volunteer services terminated or been subject to disciplinary action, for reasons relating to allegations of sexual misconduct or child abuse by you? Yes No

If yes, please explain (attach a separate sheet of paper if necessary). Please include in your explanation the date, nature and place of the occurrence(s), allegation(s) and the disposition of the matter(s). Also, identify your employer and supervisor at the time by name, address and telephone number.

3. Have you ever been arrested or convicted of a crime (felony or misdemeanor) other than a minor traffic violation? Yes No

If yes, please explain (attach a separate sheet of paper if necessary). Please include in your explanation the date and place of any conviction, and the crime for which you were convicted.

4. Are you presently abusing alcohol or using any illegal drugs? Yes No



Archdiocese of Mobile Acknowledgement

Acknowledgement of Receipt and Review of the Archdiocese of Mobile Child Protection Policy

This is to acknowledge that I have received and reviewed a copy of the Archdiocese of Mobile Child Protection Policy.

I understand that I am responsible for complying with the Policy as stated and, if I am an employee or volunteer, that questions or clarifications regarding the Policy should be directed to my immediate supervisor or to the Archdiocesan Office of Administration. If I am a priest, deacon, religious, or seminarian, I understand that questions should be referred to the Archbishop or his designee.

I further understand that the Archdiocese of Mobile reserves the right to change, modify and/or revise any part of the Policy at any time.

Signature: _____

Name (please print): _____

Parish/School/Agency: _____

Position: _____

Date: _____

Applicant/Volunteer Release Statement

IMPORTANT: THE FOLLOWING STATEMENT MUST BE READ AND SIGNED

- The information provided in this Application is true, correct and complete. If employed or accepted as a volunteer, any misstatement or omission of fact on this Application may result in my dismissal.
- I grant permission to the Archdiocese of Mobile to conduct a pre-employment or pre-volunteer screening of my background and references and release the Archdiocese of Mobile and Archdiocesan schools, parishes, organizations, agencies, ministries, and other entities if applicable, from any and all resultant liability. This screening may include, but is not limited to, background investigations, criminal history checks, consumer reports, investigative consumer reports, and other reports which may bear upon an applicant or a volunteer's fitness for a position. 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 understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report prepared on me upon my written request to the entity preparing the report, when the request is made within a reasonable time after the date thereof.
- I grant permission to the Archdiocese of Mobile to release this Application and attendant documents to the appropriate department, agency, search/committee and prospective supervisor within the Archdiocese of Mobile. I understand my signature absolves and releases the Archdiocese of Mobile from any and all liability for any and all legal action involving relinquishment of the information to others.
- I hereby release any reference contact, whether identified or not in this Application, and waive any and all claims and 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 will abide by the policies and procedures of the Archdiocese of Mobile.
- If employed, I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.
- I will be required to furnish proof of identity and eligibility to work in the U.S. once a conditional job offer has been made.
- I am aware that background checks may be updated periodically.
- Upon termination, I authorize the release of reference information by the Archdiocese of Mobile.
- I intend this to be 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.
- I HAVE CAREFULLY READ THIS RELEASE AND KNOW THE CONTENTS. I SIGN THIS RELEASE AS MY OWN FREE ACT.

Name _____ (Printed)

Signature _____ Date _____

Applicant's Signature

Date