

DIOCESE OF COLUMBUS
PARISH VOLUNTEER APPLICATION FORM

Please print clearly.

Name of Parish (City) _____
Program(s) and/or Position(s) Applicant will be volunteering for _____

Where will the activities be held? _____

Dear Volunteer:

Thank you for offering your time and talents to work with the children and youth of our parish. Volunteers such as you are indispensable to our programs. Because you will be working with our young people, we require some basic information about you. This assures the best possible programs for our young people. Please fill in the information requested below, and return this form to the Director/Coordinator of Religious Education, Youth Minister, or the parish office.

Name of Applicant _____ Male Female
Social Security Number _____ - - Date of Birth _____ / ____ / ____
Address _____
City _____ State _____ Zip Code _____
Phone(s) _____
E-Mail _____
Current Employment (position and location) _____

Availability:

Sunday Monday Tuesday Wednesday Thursday Friday Saturday
Mornings Afternoons Evenings
Weekly Twice Monthly Other _____

Have you ever had a criminal records check? No Yes
If yes, please list the year a background check was last performed, and the result _____

If no, do you authorize fingerprint impressions and a criminal records check if requested? No Yes

NOTE: AT ANY TIME YOU MIGHT BE REQUIRED TO PROVIDE A SET OF FINGERPRINT IMPRESSIONS AND A CRIMINAL RECORDS CHECK MIGHT BE CONDUCTED WITH RESPECT TO YOU. (ORC §109.575)

Do you have a history of?

Alcohol or drug abuse No Yes

Mental Illness No Yes

Legal Problems

1) Have you ever been arrested? No Yes

2) Have you been convicted of child neglect or abuse of any kind, or a felony? No Yes

3) Has your driver's license ever been suspended or revoked? No Yes

4) Have you ever been on probation? No Yes

Please explain any 'Yes' answers _____

EMERGENCY CONTACT INFORMATION

Emergency Contact Person _____
Address _____
Phone(s) _____

Chronic Conditions (e.g. Allergies, Epilepsy; Diabetes) _____

Medications _____

Medical Insurance _____ Policy Number _____

Address _____ Phone (____) _____

Member's Name _____ Phone (____) _____

Family Doctor _____ Phone (____) _____

PREVIOUS VOLUNTEER EXPERIENCES

Location	Position	Length of Service
Location	Position	Length of Service
Location	Position	Length of Service
Location	Position	Length of Service
Location	Position	Length of Service

REFERENCES

(Give full names and telephone numbers.)

1) _____

2) _____

3) _____

CODE OF CONDUCT

- Volunteers work collaboratively with the pastor and/or other supervisors and associates in ministry.
- Volunteers faithfully represent and practice the teachings of the Catholic Church with integrity in word and action.
- Volunteers are competent and receive education and training commensurate with their role(s) and responsibilities.
- Volunteers respect the diversity of spiritualities in the faith community and will not make their own personal form of spirituality normative.
- Volunteers recognize the dignity of each person and refrain from behaviors or words that are disrespectful of anyone or any group.
- Volunteers serve all people without regard to gender, creed, national origin, age, marital status, socioeconomic status, or political beliefs.
- Volunteers act to ensure all persons have access to the resources, services and opportunities they require with particular regard for persons with special needs or disabilities.
- Volunteers are accountable to the pastor or other duly appointed representative.
- Volunteers are called to serve the faith community, carrying out their ministry conscientiously, zealously, and diligently.
- Volunteers exercise responsible stewardship of resources while holding themselves to the highest standards of integrity regarding fiscal matters placed in their trust.
- Volunteers respect confidentiality.
- Volunteers adhere to civil and ecclesial law, policy and procedure concerning the reporting of neglect, suspected abuse or when physical harm could come to the person or to a third party.
- Volunteers support the rights and roles of parents while ministering to the needs and concerns of minors.
- Volunteers are aware they have considerable personal power because of their ministerial position. Therefore, they will sustain respectful ministerial relationships, avoiding manipulation and other abuses of power. Physical, sexual, or romantic relationships between an adult volunteer and a minor are unethical and are prohibited.
- Volunteers model healthy and positive behaviors with minors. Procuring, providing, or using alcohol and/or controlled substances for or with minors is unethical and is prohibited.
- Volunteers are aware of the signs of physical, sexual, and psychological abuse and neglect.
- Volunteers are aware of their limitations with respect to paraprofessional counseling and make appropriate referrals.
- Volunteers are aware of and comply with all applicable parish, organizational and/or diocesan policies with special attention to sexual misconduct, safety, transportation, parental permission, and medical emergency policies.

I HAVE READ AND UNDERSTAND THE ABOVE CODE OF CONDUCT AND COMMIT TO UPHOLD THIS CODE IN MY MINISTRY. I AFFIRM THAT THE INFORMATION I HAVE PROVIDED IS COMPLETE AND TRUTHFUL

Applicant's Signature _____ Date _____