Archdiocese of Washington
Child Protection and Safe Environment
Pastoral Center: 5001 Eastern Avenue, Hyattsville, MD 20782
Mailing Address: P.O. Box 29260, Washington, D.C. 20017
Phone: 301.853.5308 Fax: 301.853.5675
Email: childprotection@adw.org

VOLUNTEER APPLICATION

This form is to be completed, signed and returned to the Child Protection Compliance Coordinator at the parish, school or agency at which you are to provide volunteer services. This application will be retained in a file on site.

Last Name First Middle	Last 4 Digits of SSN	Date
Present Street Address City State Zip	Daytime Phone	
	Evening Phone	
Permanent Address (If different from present address)	Cell Phone No.	
	E-mail Address	
Have you ever volunteered for an Archdiocesan location? ☐ Yes ☐ No If yes, give details:	Are you 18 years of age or older? ☐ Yes ☐ No	

I am interested in VOLUNTEERING at ☐ school: _____; **☐ parish:** _____; **☐agency:** _____
Interested in volunteering for ☐ school activities ☐religious education ☐ youth ministry ☐ coaching ☐other_____

I am available ☐ mornings☐ afternoon ☐evenings ☐ weekdays ☐ weekends **Date available:** _____

VOLUNTEER ACTIVITIES

Please list all present and former volunteer activities beginning with your present or most recent position first. Use additional pages if needed. Include all other names worked under if different than the name you used on this form.

Parish/Company/Organization Name	Phone	From To
Address	City, State Zip	
Duties/Responsibilities		
Parish/Company/Organization Name	Phone	From To
Address	City, State Zip	
Duties/Responsibilities		
Parish/Company/Organization Name	Phone	From To
Address	City, State Zip	
Duties/Responsibilities		

MINOR'S INFORMATION

Current year: _____

Child's name: _____ Child's name: _____
Current Grade: _____ Current Grade: _____

IMPORTANT – PLEASE READ THIS

(You must complete questions I, II, & III.)

I. **Has a complaint (civil, criminal, or otherwise) ever been filed against you that alleged any inappropriate conduct with minors, sexual misconduct, or child abuse by you (including internal complaints given to management or supervisors at places of employment)?**

☐Yes ☐No

(If yes, please explain. Please include in your explanation the offense alleged and the disposition of the matter, including: the date and jurisdiction of any conviction; guilty plea; nolo contendere plea (no contest); finding of guilt following a trial; or, the receipt of probation before judgment.)

II. **Has a complaint (civil, criminal, or otherwise) ever been filed against you that alleged your participation in, facilitation of, or failure to report any inappropriate conduct with minors, sexual misconduct, or child abuse by another (including internal complaints given to management or supervisors at place of employment)?**

☐Yes ☐ No

(If yes, please explain. Please include in your explanation the offense alleged and the disposition of the matter, including: the date and jurisdiction of any conviction; guilty plea; nolo contendere plea (no contest); finding of guilt following a trial; or, the receipt of probation before judgment.)

III. **Have you ever chosen not to continue any employment, had your employment terminated, or been subject to any disciplinary action, for reasons relating to allegations of inappropriate conduct with minors, sexual misconduct, or child abuse by you?**

☐Yes ☐ No

(If yes, please explain. Please include in your explanation the offense alleged and the disposition of the matter, including: the date and jurisdiction of any conviction; guilty plea; nolo contendere plea (no contest); finding of guilt following a trial; or, the receipt of probation before judgment.)

IMPORTANT – The following must be read and signed by all applicants.

I hereby confirm that the information provided in this application is true, correct, and complete. If accepted as a volunteer, any misstatement or omission of fact on this application may result in my dismissal. I hereby authorize the Archdiocese of Washington to conduct, obtain, and review state and federal criminal background checks based on the personal identification information I have provided herein. I hereby grant the Archdiocese of Washington permission to check my background and references as set forth above. Except in the case of its negligent misuse of the information obtained, I hereby release the Archdiocese of Washington, its officers, directors, agents, employees, or representatives from any and all claims arising from or in connection with my background screening. I understand and acknowledge the Roman Catholic religious nature of the Archdiocese of Washington. I understand and acknowledge that, in accordance with their role as Church volunteers and in witness to the Gospel of Jesus Christ, archdiocesan volunteers must conduct themselves with integrity and act in a manner consistent with the official teachings, doctrines, laws, and policies of the Roman Catholic Church.

Print Name: _____ **Signature:** _____ **Date:** _____

This section is to be completed by Pastor, Principal or Agency Director only.

The necessity of passing a state and federal criminal background check for positions involving contact with minors or other vulnerable persons while providing volunteer services has been explained to this applicant. Acceptance of volunteer services is contingent upon the applicant successfully completing the state & federal criminal background check.

_____ _____ _____

Authorized Signature **Date** **Name of Parish, School, Agency** **Location Number** **Telephone number**

Signed applications are to be returned to the Child Protection Coordinator at your parish, school or agency.

CONFIDENTIALITY AND NONDISCLOSURE AGREEMENT FOR PARISH VOLUNTEERS

The contributions of dedicated volunteers provide invaluable support to parishes here in the Archdiocese of Washington. A healthy corps of volunteers is a sign of a vibrant parish.

It is an indication of the importance of volunteers to our parishes that some of them may be asked to perform duties that provide them access to information that is sensitive or confidential in nature. Without diminishing the expression of trust that such an assignment reflects, archdiocesan parishes are obligated to ask those volunteers, as a matter of prudence, to sign this agreement regarding the maintenance of the confidentiality of that information.

In performing your duties as a volunteer, you may receive certain information (whether in oral, written, or electronic form, or otherwise) from and about the parish or the Archdiocese and/or its affiliates, members, employees, volunteers or agents, including, but not limited to, the following: confidential, proprietary business information; confidential personnel information; confidential personal information; private information regarding parishioners or donors; confidential or proprietary information regarding finances or transactions, reports, policies, procedures, processes, strategies, proposals, plans, or internal deliberations; or any other confidential, proprietary or private information not readily available to the general public. This agreement refers to such information as "Confidential Information."

By signing below, you agree that you will access Confidential Information only when performing your duties as a volunteer at the parish, and will not use or disclose Confidential Information outside of performing those duties. You agree to safeguard the confidentiality of any Confidential Information accessed by, in the possession of, or known to you with at least as much care as you would safeguard the confidentiality of your own confidential information, and in any event with no less than a reasonable standard of care.

All Confidential Information accessed by and provided to you shall be the property of the parish and may be distributed or reproduced only with prior written approval from the pastor. You agree not to reveal or disclose, directly or indirectly, any Confidential Information to any person other than those to whom disclosure is necessary in the performance of your duties. You may not directly or indirectly reveal, report, publish or disclose Confidential Information to any entity or individual outside the parish without express permission from the pastor. You acknowledge and agree that your obligations under this agreement shall continue in full and in perpetuity, beyond any time at which you cease to be a volunteer at the parish.

Agreed upon by and between the parish and volunteer, this ____ day of _____, 20___.

Parish:	**Volunteer**:
By (Signature):_____	By (Signature): _____
Name:_____	Name:_____
Title:_____	Title:_____