

DECLARATIONS

We appreciate your willingness to share your faith, gifts and skills. Providing safe and secure programs for our members is of utmost importance to us. The information gathered in this application is designed to help us provide the highest quality Catholic programs for the people of our community.

Please read and initial each of the statements below:

- _____ I declare that my volunteer application is complete, that all statements are true, and agree that false statements and/or omissions, including those regarding past conduct and/or present situations may be grounds for denial of my application to provide volunteer services or dismissal from my volunteer involvement.
- _____ I hereby authorize you to conduct a personal and professional reference check for the purposes of my application. You may, among other things, contact any references, church, youth organizations, agencies where volunteer service has been completed, and any individual or organization which might have information relevant to my desired position, including a consumer credit reporting agency (if my position entails handling money). I hereby release any person contacted from any and all liability for damages regarding statements given to you about me.
- _____ I also hereby give you permission to conduct a background check, including but not limited to, a criminal arrest records check, abuse registry check, and driving record check for the purposes of my volunteer services. I agree to cooperate as necessary with the background screening process. **See separate Notice attached regarding Credit Reporting Agency check.**
- _____ I understand and agree that information may be obtained from sources that I provided in the application and that this information need not be revealed to me.
- _____ I agree to observe all of the guidelines and policies relevant to the program for which I am applying, including, but not limited to, the Archdiocesan Policies on Professional and Ministerial Conduct and the Harassment and Sexual Harassment Policy.
- _____ I understand that you have a ZERO TOLERANCE for abuse of minors and vulnerable adults and take all allegations of abuse seriously. I further understand that you cooperate fully with the authorities to investigate all cases of alleged abuse. Abuse of minors or vulnerable adults is grounds for immediate dismissal and possible criminal charges.
- _____ I understand that I can withdraw from the application process at any time and that my acceptance as a volunteer gives me no rights to continued participation in any program as a volunteer or otherwise.
- _____ If at any time my volunteer activities involve driving my vehicle, I agree that I have applicable state motor vehicle insurance for my vehicle and that I am currently permitted to drive my vehicle under the laws of the State of New Jersey. I further agree to abide by all applicable state motor vehicle laws.
- _____ My signature indicates that I have read, understand and agree to all of the above.

Do not sign until you have read and initialed the above and attached statements.

Applicant Signature _____ Date: _____ / _____ / _____

Date of Birth: _____ Social Security Number: _____

I have reviewed this application and have noted any missing information

Screening Staff Member Signature: _____

Date: _____ / _____ / _____