



Community of Christ

GREATER PACIFIC NORTHWEST USA MISSION CENTER

Registered Child and Youth Worker Application Process

Community of Christ Official Church Policy - Effective January 1, 1998

Only registered youth workers will be used in the church's children and youth programs and ministries. Registered youth worker assistants will only be used under the supervision of a registered youth worker.

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The Registered Child and Youth Worker application process within the GPNW Mission Center is as follows:

- 1) The applicant shall complete the GPNW Youth Worker Training prior to submitting an application. Trainings are available through the Mission Center in coordination with the GPNW Youth Ministries Specialist. This application must be submitted within one year of taking the training.
 - 2) The applicant shall complete the first two pages of the following five-page form, and sign page 2. The applicant must have signed the form for it to be approved.
 - 3) The congregational pastor or their designee shall complete and sign the last three pages of the five-page form, including the reference checks, interview with the applicant, and recommendation. The pastor or their designee must have signed the form in three places for it to be approved. Note: Pastors or their designees may not interview family members.
 - 4) The church representative who signed the form and conducted the reference checks and interview (#3 above) shall then forward **a copy** of the form via postal mail, or email to Jill Brunette for review (see address above). Jill Brunette will then forward application to the MCFO for final approval. The pastor shall retain the original until instructed by the MCFO to destroy it securely.
 - 5) If approved by the MCFO, the application shall then be forwarded to World Church for final processing.
 - 6) Once the application has been completely processed, the applicant's record on the Shelby database will be updated by World Church. The MCFO will then notify the pastor and the applicant of the approval. Until that time, the applicant is not a Registered Youth Worker and may not work with children or youth in the church. If there are any questions regarding the application process or the youth worker policy in general, please contact the MCFO or GPNW Youth Ministries Specialist.
- The current version of the form, completed accurately, must be submitted for review and final approval from the MCFO at least **four weeks** in advance of the camp/event for which the applicant will be serving. This will allow sufficient time for final processing and notification.
 - Applications that are more than six months old from the time the applicant signs it to the time World Church Office of General Counsel receives it will not be accepted.
 - All child and youth workers and assistants ages 15 and up must be registered through this process.



Community of Christ

Registered Children and Youth Worker Confidential Application

This application is to be completed by all people wishing to serve in any position with the Community of Christ that involves direct contact with children or youth. The intent of this application is to help the church provide a safe and secure environment for young people who participate in ministry and to assist applicants and church leaders in identifying and utilizing gifts and skills of the applicant.

| | | | |
|--|---------|------------------|---------|
| Date of Application: <i>(*Please ensure submission is no longer than six months from completion date.)</i> | | Date of Birth: | |
| Full Name: (Last) | (First) | (Middle) | (Other) |
| Present Street Address: | | | |
| City, State/Province: | | Zip/Postal Code: | |
| Telephone Contact <i>(Include Area Code)</i> : | | | |
| Have you ever been convicted of a crime other than a minor traffic violation? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If yes, please indicate the date and nature of the offense. | | | |
| Have you ever been, or are you currently, under investigation by the Department of Social Services (or any equivalent department/agency) for child abuse and/or neglect or any criminal activity involving a minor? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If yes, please indicate the date and nature of the record. | | | |
| <i>I understand that the church will contact the appropriate agencies if I have answered "yes" to either of the two previous questions, and I give my permission for them to do so.</i> | | | |
| Name of congregation/church where you regularly attend: | | | |
| Is this a Community of Christ congregation? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Current Pastor: | |
| Pastor's Phone: | | Pastor's E-mail: | |
| List the name, city, and state/province of other congregations you have attended regularly during the past five years: | | | |
| List your previous experience working with young people. | | | |
| List any gifts, training, education, or other factors that have prepared you for children and youth ministry. | | | |



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Personal References

No relatives please. If applicant is not affiliated with Community of Christ for more than six months, please consult administrator.

| Reference #1 | | Reference #2 | |
|-----------------|------------------|-----------------|------------------|
| Name: | | Name: | |
| Address: | | Address: | |
| City: | | City: | |
| State/Province: | Zip/Postal Code: | State/Province: | Zip/Postal Code: |
| Telephone: | | Telephone: | |
| E-Mail: | | E-Mail: | |
| Reference #3 | | | |
| Name: | | | |
| Address: | | | |
| City: | | | |
| State/Province: | Zip/Postal Code: | | |
| Telephone: | | | |
| E-Mail: | | | |

Applicant's Statement

I authorize any references or organizations listed in this application to give you any information they may have regarding my character and fitness for children and youth work. I release all such references from liability for any damage that may result from furnishing such evaluations to you, and I waive any right to inspect references provided on my behalf.

Should my application be accepted, I agree to be bound by the rules, regulations, and policies of Community of Christ, and to act in accordance with those, in the performance of my services on behalf of the church.

I hereby attest and certify that I have never been convicted of, nor pled guilty to: child abuse, endangering children, gross sexual imposition, sexual imposition, voyeurism, public indecency, any offense of violence, or any existing or former offense of any municipal corporation, any state, United States, or any other nation that is substantially equivalent to any of the above offenses. (If you have been convicted of, or pled guilty, to any of the above offenses and wish to explain the circumstances thereof, please do so on a separate sheet.) I further certify that I have never been discharged from employment or a volunteer position because of any activity covered by the foregoing.

I hereby authorize any present or former employer, person, firm, corporation, physician, or government agency to answer any and all questions and to release or provide any information within their knowledge or records, and I agree to hold any and all of them harmless and free of any liability for releasing any truthful information that is within their knowledge and records. I further authorize the Community of Christ to conduct a check of my police criminal records and agree that I will fully cooperate in providing all information and signing all documents necessary to conduct such a check.

I hereby attest and certify that the above information provided by me is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may disqualify my application or result in my immediate dismissal if I am already serving in a children- and youth-related position.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature*: _____ Date: _____

*if applicant is under 18 years of age

Please submit this form to your Community of Christ pastor or other appropriate jurisdictional officer for processing.



Community of Christ

Record of Contact with Children and Youth Workers Applicant's References

Confidential Information: All sections must be completed.

| | | |
|--|-------|--|
| Applicant's Name: | | |
| First Reference | | |
| Person contacted: | | |
| Friend/member/other: | Date: | Length of time applicant known: <i>(Must be more than six months)</i> |
| Method of contact: <input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Other: | | |
| Name of person making contact: | | |
| Reference's comments about applicant were <input type="checkbox"/> favorable <input type="checkbox"/> guarded <input type="checkbox"/> unfavorable | | |
| Summary of reference's comments: | | |
| Second Reference | | |
| Person contacted: | | |
| Friend/member/other: | Date: | Length of time applicant known: <i>(Must be more than six months)</i> |
| Method of contact: <input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Other: | | |
| Name of person making contact: | | |
| Reference's comments about applicant were <input type="checkbox"/> favorable <input type="checkbox"/> guarded <input type="checkbox"/> unfavorable | | |
| Summary of reference's comments: | | |
| Third Reference | | |
| Person contacted: | | |
| Friend/member/other: | Date: | Length of time applicant known: <i>(Must be more than six months)</i> |
| Method of contact: <input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Other: | | |
| Name of person making contact: | | |
| Reference's comments about applicant were <input type="checkbox"/> favorable <input type="checkbox"/> guarded <input type="checkbox"/> unfavorable | | |
| Summary of reference's comments: | | |

Signature of person filing this report: _____ Date: _____

Print name: _____ Title: _____



Community of Christ

Statement of Personal Interviewer

Confidential Information

All children and youth worker applicants must be interviewed by the appropriate church officer, or the person designated to do so by that officer. Before the interview, the interviewer needs to review the Application and the applicant's Record of Contact. *Note: Pastors or their designees may not interview family members.* The following questions are examples of questions that should be included in the interview.

- What do you feel are your strong points as a children and youth worker?
- What do you feel are your weak points?
- What experience have you had working with young people?
- Summarize your experience with the church.
- How do you feel about receiving training that will help you become a more effective worker?
- Why do you want to be a children and youth worker?
- Describe your involvement in church children or youth programs as you were growing up.
- As you were growing up, did you face any problems that you feel may impact your ministry?
- How do you and your family feel about giving the necessary time to children or youth work?
- How do you feel about being a role model for young people?

I have interviewed _____ and reviewed the references.

Applicant's Name

I recommend. To the best of my knowledge, I find the applicant to be of good character and to possess the qualities needed to serve as a children and youth worker in Community of Christ.

I cannot recommend this individual as a children and youth worker in Community of Christ.

Comments: _____

Interviewer's signature: _____ Date: _____

Print interviewer's name: _____ Title: _____



Community of Christ

Statement of Church Officer *Confidential Information*

I have reviewed the Application, Record of Contact, and Statement of Personal Interviewer for

_____ *Applicant's Name*

I recommend. To the best of my knowledge, I find the applicant to be of good character and to possess the qualities needed to serve as a children and youth worker in the Community of Christ.

I cannot recommend this individual as a children and youth worker in the Community of Christ.

_____ **Signature of Church Officer (may/may not be as previous)*

Date: _____

_____ *Print Name*

Phone Number: _____

Designation: _____

E-mail: _____

Address of Church Officer: _____

City/State or Province/Zip or Postal Code: _____

Nation: _____

Approved by Mission Center President or Mission Center Financial Officer
*(*Signature required, even if it is the same person as above)*

Signature: _____ Date: _____

Mission Center: _____

****Best practice dictates different officers if possible.***