

## **VOLUNTEER APPLICATION**

ARCHDIOCESE OF ATLANTA (Unpaid Workers)

Parish/School/Agency Name:
Transfiguration

## Volunteer Profile

The climate in the United States at this point in history is such that a concern about potential liability is raised in every sector of American life, including the Church. This is coupled with a heightening awareness of a responsibility to ensure that those who act in the name of the Church would never violate basic Christian decency.

In order to protect the Church, those whom it serves and those who serve it, we ask you to complete the form below. A physical copy of each application for volunteer service will be kept on file for one (1) year following the termination of the volunteer's service, and an electronic copy of the application will be kept for fifty (50) years following the destruction of the physical document.

(Last)	(Fire	st)		(Middle Initial)				
Name:(Last)				(Middle Initial)				
Address:	(Cit)		(State)	(7in)				
(Street)	(City)			(Zip)				
Home Phone: ()	Busin	ess Phone: (						
Cell Phone: ()	E-mai	l Address:						
Date of Birth://	Social	Security Number	er: <u>XXX</u> – <u>XX</u> -					
VOLUNTEER HISTORY Please list your last three volunteer	If yes, give a short exp indicate the date, natur to the complaint, where	e, and place of the	he incident leading	FOR PARISH/SCHOOL/AGENCY USE ONLY INTERVIEWED				
activities, starting with the most recent.	disposition of the comp		was meu, and me	By:				
your employ allegations of If yes, please the disposition the time, incepted for, or convicted of a crime other man a minor traffic violation?  Yes \sum No f yes, explain fully the circumstances. Such charge or conviction may be elevant if job related, but does not bar ou from volunteering.)  your employ allegations of If yes, please the disposition the time, incepted with, rrested for, or convicted of a crime other man a minor traffic violation?  e. Have you explain fully the circumstances. Such charge or conviction may be elevant if job related, but does not bar ou from volunteering.)		minated for reabuse by you?   hort explanation allegations, and our employer's  ved any medical cal, for reasons i by you?  Yes	of the allegations, I your employer at name, address and treatment, nvolving physical No eatment, including ying the treating	POSITION ASSIGNED:  a. Is the position to which the volunteer has b assigned one that requires screening?				
2. Have you ever been the subject of an investigation involving an allegation of sexual abuse? Yes No f yes, please explain:  3. Has a civil or criminal complaint ever been filed against you alleging physical abuse or sexual abuse? Yes No	Environment  Safe Environ	dividuals must quirements wh plication screening* ement of Archdi	complete all ich include:	Date  ACCEPTED:  Signature of Pastor/Principal  Date				
	X Signature of App		Date	*Background screenings can only be processed if candidate has a valid social security number. Volunteers without a SSN, must provide the locations with three references and the references must be checked prior to beginning any volunteer work.				

Revised December 2015

checked prior to beginning any volunteer work.





	Consent to Reque	st Consui	ner Report &	t Investig	ative Consi	umer Rep	ort Info	rmation			
Applicant's First Name	or Initial La	st Name		***							
I understand that the NY 10011, (877) 42 process. I also unders update, renew or exten	<b>24-2457</b> to obtain stand that if hired, it	a consu	mer report ar	nd/or inve	stigative co	onsumer i	eport ("	Report")	as part	of the	hiring
I understand <b>Sterling</b> background, bankrupti accounts placed for col record, subject to any through direct or indirect who may have such obtained through any whom I am acquainted	cies, lawsuits, judo llection, character, limitations impos ect contact with for knowledge. If an means, including b	gments, p general re ed by ap mer empl investigat	paid tax liens, eputation, persolicable federa oyers, schools ive consumer	, unlawful sonal char al and sta s, financial report is	detainer a acteristics a te law. I institution being req	actions, fa and standa understa s, landlord uested, I	ilure to ard of liv and such is and po underst	pay spoo ing, drivin informat ublic agen and such	usal or one of the original of the original orig	child su d and cr y be ob other po ation m	ipport, riminal stained ersons nay be
The nature and scope of	of the investigation	sought is	indicated by t	the selecte	ed services	below: (E	mploye	r Use On	ly)		
Criminal Check	Background	☐ Educ	cation Verificat	tion		Sex Offe	ender Se	arch			
SSN Trace		☐ Emp	loyment Verifi	cation		] OFAC/T	errorist	Watch Lis	st		
☐ Motor Vehicle	Report	Pers	onal Reference	е		Fraud (		e Contro	ol Info	Systen	ה
Consumer Cre	edit Report		essional nse/Certification	on		ı `	•	ector Ge	neral S	anction	ŝ
Other Please l	_ist:										
I acknowledge receipt state summary of right				der the Fa	ir Credit Re	eporting A	ct and, a	as require	d by lav	v, any r	elated
This consent will not affect my ability to question or dispute the accuracy of any information contained in a Report. I understand if COMPANY makes a conditional decision to disqualify me based all or in part on my Report, I will be provided with a copy of the Report and another copy of the Summaries of Rights, and if I disagree with the accuracy of the purported disqualifying information in the Report, I must notify COMPANY within five business days of my receipt of the Report that I am challenging the accuracy of such information with STERLING.											
I hereby consent to this	s investigation and	authorize	COMPANY to	procure a	Report on	my backgı	round.				
In order to verify my identity for the purposes of Report preparation, I am voluntarily releasing my date of birth, social security number and the other information and fully understand that all employment decisions are based on legitimate non-discriminatory reasons.											
The name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries regarding the investigative consumer report is:							quiries				
Sterling Infosystems, Inc.   249 W 17 <sup>th</sup> St. 6 <sup>th</sup> Floor, New York, NY 10011   877-424-2457   or   5750 West Oaks Boulevard, Ste. 100 Rocklin, CA 95765   800-943-2589   or   629 Cedar Creek Grade, Winchester, VA 22601   866-266-3444						e. 100					
California, Maine of any Report obta	e, Massachusetts, ined by COMPANY	<b>Minneso</b> from STEF	<b>ta, New Jers</b> RLING by chec	<b>ey &amp; Okla</b> king the b	ahoma Appox. (Check	olicants C conly if yo	<b>)nly:</b> I h ou wish t	ave the r to receive	ight to re a copy)	equest a	з сору
California, Conne understand that CO unless: (i) the info Vermont only – in the be a financial instite employment with a financial institution Regulation or an ele Exchange Commission information (Vermone)	OMPANY will not ob ormation is required California the finand oution as defined in a financial institution or a credit union ntity or an affiliate sion (Maryland only	tain information information in the state of the entire of	mation about (ii) I am seek tion must be s 11101(32) o epts deposits tuaranty corpoitty that is reg am seeking e	my credit king emplo subject to or a credit that are in oration that istered as mploymen	history, creyment with Sections 68 union as do sured by a to is approvant in vestmet in a posit	dit worthing a financial of 1-6809 of 1-6809 of 1-6809 of 1-6809 of 1-8909 of 1-8900 o	ness, creatiness, creating the U.S. V.S.A. ency, or e Maryla or with the involves	edit stand ion (Califo S. Code a § 30101( an affilia and Comine United access to	ing, or contain, Cond in Ve nd in Ve (5)); (iii) te or sub missione States Soconfide	credit ca connecticument it I am se bsidiary or of Fin Securitie ential fin	ipacity ut and t must eeking of the hancial es and hancial





employer or a client of the employer, including the authority to issue payments, collect debts, transfer money, or enter into contracts (Vermont only); (vi) COMPANY can demonstrate that the information is a valid and reliable predictor of employee performance in the specific position being sought or held; (vii) I am seeking employment in a position that involves access to an employer's payroll information (Vermont only); (viii) the information is substantially job related, and the bona fide reasons for using the information are disclosed to me in writing, (complete the question below) (Connecticut, Maryland, Oregon and Washington only);(ix) I am seeking employment as a covered law enforcement officer, emergency medical personnel, firefighter police officer, peace officer or other law enforcement position (California, Oregon and Vermont only - in Oregon the police or peace officer position must be sought with a federally insured bank or credit union and in Vermont the law enforcement officer position must be as defined in 20 V.S.A. § 2358, the emergency medical personnel must be as defined in 24 V.S.A. § 2651(6), and the firefighter position must be as defined in 20 V.S.A. § 3151(3)); (x) the COMPANY reasonably believes I have engaged in specific activity that constitutes a violation of law related to my employment (Connecticut only); (xi) I am seeking a position with the state Department of Justice (California only); (xii) I am seeking a position as an exempt managerial employee (California only); and/or (xiii)) I am seeking employment in a position (other than regular solicitation of credit card applications at a retail establishment) that involves regular access to all of the following personal information of any one person: bank or credit card account information, social security number, and date of birth,, I am seeking employment in a position that requires me to be a named signatory on the employer's bank or credit card or otherwise authorized to enter into financial contracts on behalf of the employer, I am seeking employment in a position that involves access to confidential or proprietary information of the Company or regular access to \$10,000 or more in cash (California only).

Bona fide reasons why COMPANY considers credit information substantially job related (complete if this is the sole basis for obtaining credit information) or in California and Vermont the COMPANY'S basis for the credit check.

**NY Applicants Only:** I also acknowledge that I have received the attached copy of Article 23A of New York's Correction Law. I further understand that I may request a copy of any investigative consumer report by contacting STERLING. I further understand that I will be advised if any further checks are requested and provided the name and address of the consumer reporting agency.

California Applicants and Residents: If I am applying for employment in California or reside in California, I understand I have the right to visually inspect the files concerning me maintained by an investigative consumer reporting agency during normal business hours and upon reasonable notice. The inspection can be done in person, and, if I appear in person and furnish proper identification; I am entitled to a copy of the file for a fee not to exceed the actual costs of duplication. I am entitled to be accompanied by one person of my choosing, who shall furnish reasonable identification. The inspection can also be done via certified mail if I make a written request, with proper identification, for copies to be sent to a specified addressee. I can also request a summary of the information to be provided by telephone if I make a written request, with proper identification for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or directly charged to me. I further understand that the investigative consumer reporting agency shall provide trained personnel to explain to me any of the information furnished to me; I shall receive from the investigative consumer reporting agency a written explanation of any coded information contained in files maintained on me. "Proper identification" as used in this paragraph means information generally deemed sufficient to identify a person, including documents such as a valid driver's license, social security account number, military identification card and credit cards. I understand that I can access the following website <a href="http://sterlinginfosystems.com/privacy">http://sterlinginfosystems.com/privacy</a> to view STERLING'S privacy practices, including information with respect to STERLING'S preparation and processing of investigative consumer reports and guidance as to whether my personal information will be sent outside the United States or its territories.

Signature: Today's Date:

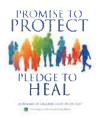




For Office Use Only – Group ID (optional)					
For Office Use Only – User ID (optional)					
For Office Use Only - Location / Store # (optional)					
First Name	Middle Name or Initial				
Last Name	Date of Birth (MMDDYYYY)				
	0 0				
Other Names Known By	Male Female				
Social Security Number Primary Telephone Number	(no dashes)				
Current Address	Apt # #yrs at this address				
City	State Zip Code				
Previous Address	Apt # #yrs at this address				
City	State Zip Code				
Driver's License Number (no dashes)	License State				
Email Address					
Email Address					



## Acknowledgment of Receipt and Compliance Safe Environment Standards of Conduct Archdiocese of Atlanta



The Archdiocese of Atlanta ("Archdiocese") has adopted polices and standards of conduct as an integral part of its Safe Environment program. These policies and standards of conduct are contained in the Archdiocese's Safe Environment booklet incorporating each of the following:

- Sexual Abuse Policy
- Code of Conduct
- Ministerial Standards for Adults Who Have Regular Contact with Children and/or Vulnerable Individuals
- Policy concerning the Protection of Disabled Adults and Elder Persons
- Social Media Policy

By signing below, I hereby acknowledge that I have received information on how to find a copy of the Safe Environment policy booklet in the Archdiocesan website and that I have read the booklet in its entirety, including each of the policies and standards of conduct described above, and I agree to conduct myself in full compliance with all Safe Environment policies and standards of conduct stated in the Safe Environment booklet and as may be adopted by the Archdiocese in the future. This also confirms that I will attend a <u>VIRTUS Protecting God's Children training</u> before I begin paid or volunteer work for the Archdiocese of Atlanta or within 60 days of my scheduled start date. I understand that the Archdiocese shall rely on this signed Acknowledgment of Receipt and Compliance to ensure my acceptance and full agreement with all said Safe Environment policies and standards. This signed Acknowledgment will be maintained in my personnel file.

Name	e;		
	[Please type or print]		
Signa	ture:		
Parisl	n/School/Organization:		
Date:	-		
Please	e check one:		
	Priest	14	Employee
	Order Priest	-	Independent Contractor
	Deacon		Volunteer
	Religious Brother or Sister		
	Seminarian		
	Aspirant/Candidate to Permanent Diac	onate	