

Archdiocese of Kansas City in Kansas

Virtus[®] Protecting God's Children Facilitator Application

Thank you for the most generous offer of your time and talents to provide the Protecting God's Children Program to the people of the Archdiocese of Kansas City in Kansas. Facilitator applicants for Protecting God's Children must complete this form, provide references, and be willing to submit to a thorough background check as part of the screening process. Your signature and initials in the appropriate places on the application are required prior to processing your application.

Please complete this form and return it to:

Jenifer Valenti, Director, Office of Child & Youth Protection
Archdiocese of Kansas City in Kansas
12615 Parallel Parkway, Kansas City, KS 66109
Fax: 913-721-1577 Email: jvalenti@archkck.org

Please **print** your name: _____
First Middle Last

Street address: _____

City, State, Zip Code: _____

Phone: Day _____ Evening _____

Email: _____

Name of Parish & City: _____

Check here if you have had a background check with the Archdiocese of Kansas City in Kansas in the past three years.

VOLUNTEER EXPERIENCE

Please list your volunteer experience with current and previous parishes and church organizations and with other civic or non-profit organizations. (use the back if needed)

| Organization | Duties | Dates | Contact | Phone |
|--------------|--------|-------|---------|-------|
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REFERENCES

| Reference Name | Address (City, State, Zip) | Daytime Phone | How long have you known this person? | Has this person agreed to provide a reference? |
|--------------------|-------------------------------|------------------|--|---|
| Professional/Civic | | | | |
| Personal | | | | |

Has any parish, school, facility, organization, or faith community terminated your volunteer service?
 Yes _____ No _____ If yes, what happened? _____

Have you ever been accused of physically, sexually, or emotionally abusing a child?

Yes _____ No _____ If yes, what happened? (use another page if necessary)

Have you attended Protection God's Children training?

Yes _____ No _____ If yes, please share your impressions: _____

List previous experience, training and education you have had that will enhance your ability to serve as a Facilitator for the Protecting God's Children program.

Why do you want to be involved in delivering this program to the Archdiocese? What do you intend to accomplish by your participation as a Protecting God's Children Facilitator?

Are there any time constraints that will affect your ongoing ability to train parishioners?

EDUCATIONAL HISTORY

| Dates (start with most recent) | School name and address (City, State Zip) | Type of School | Name of Program or Degree | Program completed? |
|---|--|-----------------------|----------------------------------|---------------------------|
| Started ___/___/___ Ended ___/___/___ | | | | |
| Started ___/___/___ Ended ___/___/___ | | | | |

EMPLOYMENT HISTORY

| Dates of employment (start with most recent) | Company name and address (City, State Zip) | Immediate supervisor name & telephone | Position held | Reason for leaving position |
|---|---|--|----------------------|------------------------------------|
| Started ___/___/___ Ended ___/___/___ | | | | |
| Started ___/___/___ Ended ___/___/___ | | | | |
| Started ___/___/___ Ended ___/___/___ | | | | |

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In addition to English, do you speak any other language? (Check all that apply)

- Spanish
- Vietnamese
- Other (Please list: _____)

The Archdiocese of Kansas City in Kansas appreciates your willingness to share your faith, gifts, and skills. Providing a quality program to educate the Catholic community about child abuse and preventing harm to our children and youth is a priority for us. The information gathered in this application is designed to help us ensure that we are providing the highest quality programs for the people of our community.

Please read and initial each of the statements below.

- I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application, or dismissal from my involvement with the Protecting God’s Children program.
- I understand that a thorough background check will be conducted prior to my service and I authorize the Archdiocese of Kansas City in Kansas to investigate all statements contained in the application.
- I agree to conduct training according to the program guidelines and policies for the Protecting God’s Children Program as customized for the Archdiocese of Kansas City in Kansas.
- I hereby waive any right to inspect any information provided about me by references or any representative of organizations and groups mentioned in this application or personal interview.
- I understand that the Archdiocese of Kansas City in Kansas has a **ZERO TOLERANCE** for child abuse and takes all allegations of child abuse seriously. I further understand that the Archdiocese cooperates fully with the authorities to investigate all cases of alleged child abuse. Abuse of minors or vulnerable adults is ground for immediate dismissal and possible criminal charges.
- I understand that I can withdraw from the application process at any time.
- I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of the application to provide employment and/or volunteer services.
- My signature indicates that I have read and understand the above stated information within this release and am signing below of my own free will.

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

Applicant signature: _____ **Date:** ___/___/___

Printed name: _____