





# VOLUNTEER COVENANT AGREEMENT

The congregation of St. James United Methodist Church is committed to providing a safe and secure environment for all children, youth, and volunteers who participate in ministries and activities sponsored by the church. The following policy statements reflect our congregation's commitment to preserving this church as a holy place of safety and protection for all who would enter and as a place in which all people can experience the love of God through relationships with others.

1. **No adult who has been convicted of child abuse (either sexual, physical, or emotional) should volunteer to work with children or youth in any church-sponsored activity.**
2. **Adult survivors of child abuse need the love and support of our congregation. Any adult survivor who desires to volunteer in some capacity to work with children or youth is encouraged to discuss his/her willingness with one of our church's ministers before accepting an assignment.**
3. **Adult workers with children and youth shall observe the two-adult rule at all times so that no adult is ever alone with one child or youth.**
4. **Adult workers with children and youth shall attend (or participate via webinar) regular training and educational events provided by the church to keep informed of church polices and state laws regarding child abuse.**
5. **Adult workers shall immediately report to their program director or Senior Staff Member any behavior that seems abusive or inappropriate.**

Please answer each of the following questions:

1. As a volunteer member in this congregation, do you agree to observe and abide by all church policies regarding working in ministries with children and youth?
2. Do you agree to observe the two-adult rule at all times?
3. Do you agree to participate in training and education events provided by the church related to your volunteer assignment(s)?
4. Do you agree to promptly report abusive or inappropriate behavior to your supervisor?
5. Do you agree to inform a minister of this congregation if you have ever been convicted of child abuse?

	Yes	No
1.	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>

*I have read this **Volunteer Covenant Agreement**, and I agree to observe and abide by the policies set forth above.*

\_\_\_\_\_  
Print Full Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

# DISCLOSURE AND AUTHORIZATION FOR EMPLOYER TO ACCESS CONSUMER REPORTS

St. James United Methodist Church, Little Rock Arkansas

## AUTHORIZATION

I hereby authorize, without reservation, the obtaining of "consumer reports" or "investigative consumer" reports by St. James United Methodist Church at any time after receipt of this authorization and throughout my employment or volunteer service, if applicable. I further authorize and request, without reservation, any present or former employer, school, police department, state or federal agency, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about me to furnish SecureSearch or St. James United Methodist Church with any and all background information in their possession regarding me, so that my employment qualifications may be evaluated and/or reassessed. I also agree that a fax or photocopy of this authorization with my signature should have the same authority as the original.

**By signing below, I certify: (1) that I have read and fully understand this disclosure and authorization; (2) that all of the information I am providing is true, complete, correct and accurate; and (3) that I have received the attached Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.).**

*The following is information required in order for St. James United Methodist Church to obtain a complete consumer report:*

FULL LEGAL NAME (First, Full Middle Name, Last Name)	
SOCIAL SECURITY NUMBER	DATE OF BIRTH*
STREET ADDRESS	
CITY, STATE, ZIP CODE	
DRIVER'S LICENSE NUMBER	ISSUING STATE
OTHER OR FORMER NAMES (AKA, Maiden Names, Married Names, Surnames, Etc.)	
_____	_____
CONSUMER'S SIGNATURE	DATE

\* This information will be used for background screening purposes only.

Please list all Counties and States you have lived in since the age of 18.

County	State	Name Used in County	Date From	Date To
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**DISCLOSURE**

In connection with your application for employment or volunteer service with: St. James United Methodist Church, Little Rock Arkansas (including any independent contract for services) or when deciding whether to modify or continue your ongoing employment or (if hired) or service, St. James United Methodist Church may obtain a “consumer report” and/or an “investigative consumer report” on you from **SecureSearch**, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law. A consumer report is a communication of information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used for purposes of serving as a factor in establishing your current and/or continuing eligibility for employment purposes. An investigative consumer report is a report obtained through personal interviews with individuals who may have knowledge of your character, general reputation, personal characteristics, or mode of living. The consumer reports or investigative consumer reports may contain information regarding your credit history(if applicable to position), criminal records, driving history records, education records, previous employment history, social security traces, military records, professional licensure records, drug testing, government records, and other types of background information. You further understand that these reports may contain information concerning the reasons for termination of past employment. You are hereby notified that you have the right to make a timely request for the nature and scope of any investigative consumer report. You are further notified that, prior to being denied employment based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act. Inquiries to **SecureSearch** should be directed to **SecureSearch; Consumer Disputes; 558 Castle Pines Pkwy. #B4-137, Castle Rock, CO 80108. 1 (866) 891 – 1954.**

**The following are my responses to questions about my criminal record history (if any) with descriptions to any question with a YES answer:**

Name: \_\_\_\_\_

1. Have you ever been convicted or plead guilty before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations)    Yes     No     If Yes, please explain:
  
2. Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense?    Yes     No     If Yes, please explain:
  
3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense?    Yes     No     If Yes, please explain:
  
4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States?    Yes     No     If Yes, please explain:
  
5. As of the date of this authorization, do you have any pending criminal charges against you?    Yes     No     If Yes, please explain:
  
6. Have you ever served in the US Military?                      Yes                       No
  
7. If you answered YES to the above question, did you receive a DD214?  
  
                    Yes                       No                       If Yes, can you present the document?:    Yes                       No
  
8. If you answered YES to the above question 6, did you receive an honorable discharge?    Yes     No     If No, please explain:

\_\_\_\_\_  
**Consumer signature**

\_\_\_\_\_  
**Date**

**VOLUNTEER LEADER REFERENCE FORM**

St. James United Methodist Church

321 Pleasant Valley Drive

Little Rock, Arkansas 72212

If you are not a current member of St. James UMC or have been a member for less than six months, then please complete this form and return with all other documents.

**REFERENCES** - All references must be 18 years of age or older. No reference may be a member of your immediate family (parents, siblings, spouse, stepparents, grandparents etc). **PHONE AND EMAIL ADDRESS OF REFERENCE IS REQUIRED**

This reference **SHOULD** be the pastor or a member of the program staff of the church in which you are or were formerly a church member. *\* If this reference is not from a pastor or member of the program staff of the church, please explain why.*

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

2. This reference should be someone who has known you for **TWO YEARS** or more, He/She may be a teacher, employer, classmate, etc.

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

3. This reference should be someone who has known you for **TWO YEARS** or more, He/She may be a teacher, employer, classmate, etc.

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Please note any matters, other than those addressed in the Leader Application Form, that will help us ensure optimum matching of your service with ministries with children or youth.