

Volunteer Application

Diocese/Parish/School/Facility:				
Town/City:				
Name	_ Date of Birth: _			
Maiden Name:				
Street address:	_ City:	State:	Zip:	
How long at current address:				
Phone: Home ()		_Work ()		
E-mail:				
Name of Volunteer Service Position:_			_	
What Parish do you belong to? Name		Town	For how long?	
Current employer				
Address				
Check here if you have had a crimin Catholic Schools and/or Parishes. Enter d				
Have you ever been convicted of a felo	ony or misdeme	eanor? Yes / No. If y	yes, explain:	

NOTICE: If you are applying for a position where you will have direct contact with a child or children under the age of 18 years in more than one instance; or where you will engage in an overnight activity with a child or children under the age of 18, even in one instance; or where you will have contact with adults who are senior citizens or who have physical or mental limitations, you shall be subject to a criminal history background investigation before your volunteer services begin.

Volunteer Application Consent Form for a Criminal History Background Investigation

Please review the following information carefully a			
I, [] certify and declare (Name of Volunteer Applicant)	under penalty of perjury under State		
and Federal Law that the information contained in the Diocese of Metuchen (the " DIOCESE ") is compfalsification or omission of any requested information volunteer position or activities.	my Volunteer Application submitted to blete, true and accurate. I understand that		
I understand that as part of my volunteer application activities, a criminal background investigation may the DIOCESE's review of my application to volunt activities, I now consent to and allow the DIOCESI release or copy of this release, to perform a criminal investigation on me. I also authorize them to contact agencies where volunteer service have been completely which might be relevant to my desired volunteer progranizations are authorized to release such inform Diocesan/Parish personnel.	be performed on me. In consideration of eer and/or my continuing volunteer E, or its authorized agents bearing this I and personal background and reference et any past church, youth organizations, eted, and any individual or organization osition. Such individuals and		
I authorize all persons and organizations, including law enforcement agencies and Courts that may have information concerning this background investigation, to disclose such information to the DIOCESE or its authorized agents. I hereby release the DIOCESE , its authorized agents, and all persons and organizations providing information from all claims and liabilities of any nature in connection with this investigation. I hereby further authorize that a photocopy of this authorization may be considered as valid as the original.			
I understand that the Diocese of Metuchen and Par ABUSE" policy and that they take all allegations of they will cooperate fully with the authorities to invalues of any child or any vulnerable adult, including physical or mental limitations, are grounds for imm	abuse seriously. I further understand that estigate all claims of abuse. A claim of any person who is elderly or has		
I further understand that I will read and abide by the when working with minor children and vulnerable			
Signature of Volunteer	Date		
Printed Name			
	_		

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