

Education

Name and Location of School (Include College, Graduate Work, and Summer Sessions)	Dates Attended	Diploma/Degree conferred (Please indicate Major and Minor)	Semester Hours Credit Beyond Degree
High School			
Undergraduate			
Graduate			

Employment

Present and All Prior Employers (Including Address and Telephone Number (List most recent first)	Position Held	Dates Employed From Mo/Yr to Mo/Yr	Please Indicate Full-Time or Part-Time (if part-time # of hours per week)	Reason for Leaving

Volunteer Experience

Please list your volunteer experiences with churches, schools, civic, or non-profit organizations (use back if needed).

Organization	Position	Dates	Contact	Telephone and Address
1.				
2.				
3.				
4.				
5.				

Other Qualification

In addition to your work history, what other experiences, skills, or qualifications would enhance your candidacy for a position with the Archdiocese or Parish or School?

References

List three people, unrelated to you, one of whom must be a recent employer, who can attest to your qualifications for this position.

Name	Address	Home Telephone Number	Work Telephone Number	Occupation
1.				
2.				
3.				

Background Check

If the position for which you are applying requires that you regularly work with individuals under the age of 19 or if you are applying for a position with the Archdiocesan Administration, you must undergo a background check. Please complete the attached Authorization form. If you are a non-citizen of the United States, please attach to this form a copy of your registered alien card or other proof that you are legally residing in the United States.

Certifications and Authorizations

Please initial each of the statements below and sign where noted to indicate that you have read and understand the statements.

_____ I certify that the above information is true and complete to the best of my knowledge and belief. I understand that any statement I have furnished which is shown to be false when made will be cause for disregard of this application or will be cause for my immediate dismissal if I have been hired.

_____ I understand that any employment or offer of employment is contingent on my meeting the employment eligibility requirements of the Immigration Reform and Control Act.

_____ I authorize the Archdiocese of Omaha and/or parish or school with whom I am applying to conduct any and all inquiries that it may deem necessary or advisable to verify the information provided to me and/or to supplement this information. I authorize the Archdiocese of Omaha and/or the parish or school to conduct a personal and professional background check for the purposes of my application. The Archdiocese may contact any references, past and current employers, church, youth organizations, and agencies where I have volunteered, and any individual or organization which might have information relevant to my desired position.

_____ I authorize any former employer, or any other person, firm, corporation, or government agency to provide the Archdiocese of Omaha and/ or the parish or school with any information concerning me. In addition, I release such employer, person, firm, corporation, or government agency from any previous agreement, verbal or written, which would prohibit the release of information pertinent to my application for employment with the Archdiocese of Omaha and/or the parish. I release and hold harmless the Archdiocese of Omaha and such providers of information about me from any liability that may result from the furnishing and review of this information.

_____ If I am hired, I also authorize the Archdiocese of Omaha and/or the parish to provide truthful information concerning my employment with the Archdiocese of Omaha and/or the parish to my future prospective employers, and I agree to hold it harmless for providing such information.

_____ I understand that the Archdiocese of Omaha has a ZERO TOLERANCE FOR SEXUAL ABUSE and takes all allegations of abuse seriously. I further understand that the Archdiocese of Omaha cooperates fully with the authorities to investigate all cases of alleged abuse.

_____ I understand that all Church personnel must comply with the Archdiocese of Omaha Policy on Sexual Misconduct, as well as parish/diocesan policies, practices, and procedures, including the Mandatory Reporting Requirements for suspected sexual abuse of a minor. I acknowledge that if hired, it is my obligation to comply with the Archdiocese of Omaha Policy on Sexual Misconduct and the Mandatory Reporting Requirements.

SIGNATURE OF APPLICANT

DATE OF APPLICATION

Archdiocese Of Omaha
Circle of Care
Adult Safe Environment Program
Notification, Authorization, and Screening Form

Note: For first-time certification, you must complete and submit this form AND the on-site training form. When requesting recertification, you must complete and submit this form AND the video training form. **If forms are incomplete we will not process for certification.**

Your Name (please print) First _____ Middle _____ Last _____

Address _____

City _____ State _____ Zip _____ Is this a new address? If so, provide your old address here _____

Telephone _____ email address _____

If being recertified provide your Safe Environment Certification ID # _____ (if known)

Date of Birth (Required for background check) ____ - ____ - ____

Social Security Number (Required for background check) ____ - ____ - ____

(Note: Background checks require your full date of birth and social security number.)

If name changed, (marriage or a legal process), print former name here:

Please list any other states in which you have lived in the last seven (7) years:

Below list the name(s) of the Archdiocese parish, school and/or agency where you are employed and/or volunteer. Also check the role and responsibilities, if it is not listed, please use the other column:

1. _____
___ Employee ___ Volunteer ___ Priest ___ Deacon ___ Religious Bro/Sis ___ Catechist
___ Coach ___ Educator ___ Job Applicant ___ Parish Staff ___ School Staff
___ Volunteer Applicant ___ Other: _____

2. _____
___ Employee ___ Volunteer ___ Priest ___ Deacon ___ Religious Bro/Sis ___ Catechist
___ Coach ___ Educator ___ Job Applicant ___ Parish Staff ___ School Staff
___ Volunteer Applicant ___ Other: _____

3. _____
___ Employee ___ Volunteer ___ Priest ___ Deacon ___ Religious Bro/Sis ___ Catechist
___ Coach ___ Educator ___ Job Applicant ___ Parish Staff ___ School Staff
___ Volunteer Applicant ___ Other: _____

Provide name of person, the department and what parish/school/agency you are working with for the above responsibilities: _____

If you are volunteering in a parish, have you been registered with the parish for at least six (6) months? _____ Yes _____ No

(Continued on next page)

If you are a non-citizen of the United States, **please attach, to this form, a copy of your registered alien card or other proof** that you are legally residing in the United States.

We are committed to providing a safe and secure environment for all children, youth, employees, and volunteers who participate in ministries and activities sponsored by the Archdiocese of Omaha. As part of that commitment, we conduct background checks of all applicants for employment, employees, and certain volunteers with the parish who are 19 years of age and older having regular contact with minor children and young people. The level of background check depends upon the position or potential position of the applicant, employee, or volunteer. **The information is requested solely to conduct the background check, and the record will be maintained in a confidential manner, and disclosed only to those with a legitimate need to know.**

All employees and volunteers must comply with the Archdiocese of Omaha Policy on Sexual Misconduct and the Mandatory Reporting Requirements. Please read these documents before answering the following questions. Current copies can also be found at <http://www.archomaha.com/Charter/Charter.html>

Affirmations:

1. Has your volunteer service or employment ever been terminated by any parish, school, archdiocesan agency, employer, or organization? Yes No
If yes, please explain.
2. Have you ever been investigated by the Nebraska Department of Social Services or another child protection agency? Yes No
If yes, please explain.
3. Have you ever committed, been accused of, or been convicted of physical or sexual abuse, neglect, harassment, or sexual misconduct in any form? Yes No
If yes, please explain.
4. Have your parental rights ever been terminated or have you ever been subject to any court order involving allegations of sexual, physical, or verbal abuse of a minor?
 Yes No If yes, please explain.

Certification and Authorizations

Please initial each of the statements below and sign where noted to indicate that you have read and understand the statements.

_____ I have received and have read the Archdiocese of Omaha Policy on Sexual Misconduct (Code of Conduct) and the Mandatory Child Abuse Reporting Requirements (Respect Policy) and agree to abide by them. (Also available on archdiocesan website www.archomaha.com)

_____ I certify that the enclosed information is true and complete to the best of my knowledge and belief. I understand that any statement I have furnished which is shown to be false when made will be cause of disregard of my application or my immediate dismissal from volunteer service, ministry, or employment.

(Continue on next page)

_____ I understand that the Archdiocese of Omaha has a ZERO TOLERANCE FOR SEXUAL ABUSE and takes all allegations of abuse seriously. I further understand that the Archdiocese of Omaha cooperates fully with the authorities to investigate all cases of alleged abuse.

Notice: This is to inform you that an investigative report is being obtained from a reporting agency for the purpose of evaluating you for your eligibility as a volunteer or for your employment, promotion, reassignment, or retention as an employee.

This report may contain information from public record sources bearing on your character, general reputation, personal characteristics, or mode of living. You may have a right to request additional disclosures regarding the nature and scope of the investigation.

_____ I authorize the release of my criminal conviction record information to the Archdiocese of Omaha and its parishes or schools for purposes of screening and decisions regarding volunteer or paid ministry and/or employment. **(All authorizations for release of requested information shall be effective for a period of six (6) months from the date I sign this form.)** I further authorize that a photocopy of this authorization be accepted with the same authority as the original. I also waive the requirement for a written notice from any present or former employer who may provide information based upon this authorized request. I understand that this authorization is to be part of the written employment application which I sign.

_____ I understand the release of the information in my background check may need to include specific persons in the Archdiocese of Omaha, and the parish, school or program exercising the direction, supervision or coordination of employee or volunteer services. Should this be necessary, I release and hold harmless these persons and the providers of information about me from any liability which may arise from the furnishing or review of such information.

I acknowledge that I have been given the opportunity to receive a copy of this form.

_____ Yes _____ No

Signature: _____ Date: _____

For those emailing this document, your typed name in the signature line will be taken as your attestation to the same.

Mail to: Safe Environment, 100 N 62nd Street Omaha, NE 68132

Fax to: 402-554-0783

Email to: SafeEnvironment@archomaha.org

Questions: Safe Environment Office (402) 558-3100 or (888) 303-2484