

Swansboro United Methodist Church
Safe Sanctuary
Policy and Procedures

1. Crime of Abuse Rule

Persons who are deemed a threat to children and youth shall not be accepted as a volunteer or paid worker in any church sponsored program for children or youth. All volunteers who are in direct supervision of children and youth must undergo a criminal and major traffic violation background check every two years. Those volunteers include but are not limited to

- Sunday School teachers
- VBS Volunteers
- UM Kids Volunteers
- Confirmation Volunteers
- United Methodist Youth Fellowship Volunteers
- Youth/Children Volunteers that will be driving
- All paid staff
- All volunteers within their first year of service

2. Six Month Rule

All volunteers shall have been a member or constituent of Swansboro United Methodist Church for a minimum of six months.

3. Two Adult Rule

Two adult supervisors should be present at all activities for children and youth. If the adult supervisors are related a third adult will be available. Windows in doorways should not be covered during meetings, events, and small group sessions. Doors should never be locked during a program or activity.

Contingency A: One adult supervisor may be allowed as long as they are in a room with the door open and another adult roaming supervisor.

No youth/children volunteer under the age of 18 may be a class/activity leader. Teens and pre-teens may assist with an age group at least 5 years younger than themselves with a safe sanctuary trained adult supervisor.

Any inappropriate behavior between an adult worker and a young person should be reported to the Senior Pastor and investigated immediately.

For overnight activities and trips: Two adult supervisors/chaperones shall be present. If the adult supervisors are related, a third adult must be present. These persons must be cleared in advance with the proper church leaders. If the group is of mixed gender, the leaders must include at least one male and one female. The ratio of children/youth to adults should be 1 adult per 5-7 children/youth. No adult may share a room with a youth (except their own child.)

**VOLUNTEER WORKER COMMITMENT FOR ACTIVITIES
WITH CHILDREN OR YOUTH**

(This form is to be completed by any volunteer working with children or youth in any capacity sponsored by Swansboro United Methodist Church.)

Swansboro United Methodist Church is committed to protecting all children, youth, volunteers, and staff who participate in church sponsored activities.

Please answer each question by *putting your initials* in the blank provided. Your response will be kept fully confidential.

1. As a church volunteer, do you agree to observe all church policies regarding working with youth or children?
_____ Yes _____ No

2. Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)?
_____ Yes _____ No

3. If yes, please explain fully, including date.

4. Complete Name _____
(Please print)
Identity must be confirmed with a state driver's license.

5. Social Security Number _____

Date of Birth, Month/Date/Year _____

6. Present Address: Street _____ City _____

State _____ Zip Code _____

Home Phone Number _____ Cell Phone Number _____

Previous Address (If you have moved within the last 5 years)

Street _____ City _____ State _____ Zip Code _____

7. Will you report to the church office, pastor or associate pastor any incident involving your arrest within 24 hours of the incident?
_____ Yes _____ No

8. Name, address, and phone number of church of which you are a member

9. Names, addresses, and phone numbers of other churches you have attended regularly during the past five years.

10. List previous church work involving children or youth.

11. List previous non-church work involving children or youth

12. List any gifts, callings, training, education, or other factors that have prepared you for work involving youth or children.

List two personal references. At least one should live in the Swansboro area. (Do not include relatives)

Name _____

Name _____

Address _____

Address _____

Phone Number _____

Phone Number _____

Relationship _____

Relationship _____

The information contained on this commitment form is correct to the best of my knowledge. I authorize any references listed in this application to give you any information that they may have regarding my character and fitness for work in children or youth programs. I hereby release any individual, church, employer, or other reference from any and all liability as they attempt to comply with this authorization.

Signature: _____

Date: _____

Witness: _____

Date: _____

Authorization and Request for Criminal Records Check

I, _____, hereby authorize Swansboro United Methodist Church to request the police/sheriff's department to release information regarding any record of charges or convictions contained in its files or in any criminal file maintained on me whether local, state, or national. I hereby release said police/sheriff's department from any and all liability resulting from such disclosure.

Signature: _____ Date: _____

Print Name: _____

Print maiden name if applicable: _____

Print all other aliases or other former names: _____

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Today's Date: _____