# Volunteer/Employee Covenant

First United Methodist Church is committed to providing a safe and secure environment for all children, youth, vulnerable adults, volunteers, and employees 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 worship, safe and secure for all who enter and as a place where everyone can experience God’s love through fellowship and growth in Christ.

1. Persons who have been convicted of child neglect or abuse (sexual, physical, and/or emotional) shall not volunteer or be employed to work with children or youth in any First United Methodist Church sponsored activity or in any activity to which First United Methodist Church is providing volunteers, employees, or participants.
2. Adult volunteers involved with children, youth, or vulnerable adults of our church in a *lead capacity* must have been a member or active participant of the congregation for at least six months before beginning a volunteer assignment.
3. All adult volunteers and employees working with children, youth, and vulnerable adults shall observe the “Two-Adult Rule” (as defined in the Safe Sanctuaries manual) at all times so that no adult is ever alone with a child, youth, or vulnerable adult.
4. Adult volunteers and employees working with children, youth, and vulnerable adults shall attend regular training and educational events provided by the church to keep themselves informed of church policies and state laws regarding child abuse and neglect.
5. All adult volunteers and employees shall immediately report to the Director of Children’s Ministries, Director of Youth Ministries, and/or Director of Weekday School any behavior that seems abusive or inappropriate.

**Please answer the following:**

1. As a volunteer and/or employee at First United Methodist, Wilson, do you agree to observe and abide by all policies regarding working in ministries with children and youth? \_\_\_yes \_\_\_no
2. Do you understand and agree to observe the “Two Adult Rule” at all times? \_\_\_yes \_\_\_no

3. If you are a volunteer, do you understand and agree to observe the six-month membership

(or active participation) rule? \_\_\_yes \_\_\_no

1. Have you been trained in First United Methodist Church’s Safe Sanctuaries program and agree to

abide by its dictates, expectations, and requirements? \_\_\_yes \_\_\_no

a. If no, do you agree to read the Safe Sanctuaries policy and take the training at the earliest

availability? \_\_\_yes \_\_\_no

1. Do you agree to report to the Director of Children’s Ministries, Director of Youth Ministries, and/or Director of Weekday School any observance, awareness, or suspicion of abusive or inappropriate behavior as defined in your training? \_\_\_yes \_\_\_no
2. As a volunteer and/or employee of First United Methodist Church, do you agree to inform a minister of this congregation if you have ever been convicted of child abuse? \_\_\_yes \_\_\_no

Please list any ministry areas in the church you may be interested in serving.

Weekday School

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

Printed Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date Completed Training**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Background Check Authorization**

Area of Ministry/Service: FUMC WEEKDAY SCHOOL

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (First) (Middle) (Last)

Former Name(s) Used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Maiden)

Current Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (State/Zip)

Previous Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street) (City) (State/Zip)

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Home) (Cell)

Driver’s License Number/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The information contained in this application is correct to the best of my knowledge. I hereby authorize First United Methodist Church and its designated agents and representatives to make an investigation of my background, criminal records, and where applicable, my motor vehicle records, for the purpose of confirming the information contained on my job application or volunteer form.

I understand this authorization extends to the obtaining of information which may be material to my qualifications for employment or as a volunteer.

I release First United Methodist Church and its designated agents and representatives from any and all liabilities, claim or lawsuits in regards to the information obtained from any and all of the above reference sources used.

## Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_