



Office Use Only

Date Received _____ Date Approved _____

Recommended

Not Recommended

Recommended w/conditions noted

Conference Director Signature _____

Southern New England Conference

Adventurer Staff/Volunteer Information & Voluntary Disclosure Statement

Section I Personal Information Record

Name _____ Birth Date _____

Address _____
Street Address City State Zip

Home Phone _____ Work Phone _____

Social Security # _____ - _____ - _____ Church/Adventurer Club _____

Marital Status: Married Single Divorced Name of Spouse _____

Children	Names	Birth dates	Month	Day	Year
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

Section II Health History

Do you now have or have you had any injury/sickness that might limit your involvement in Adventurer Club activities?

Yes No If yes, how would it limit/hinder? _____

Section III Educational Record

Highest Degree/Diploma held _____ Year degree/diploma received _____

School granting degree/diploma _____

College major/minor _____

Section IV Work History/Experience List all work history including supervisor's names and phone numbers.

Position/Type of Work	Company/Organization	Address	Phone	Dates Employed
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Indicate any employer you do not wish us to contact and the reason. _____

Section V Previous Residences

List all previous addresses where you have resided for the past ten years, including which years you lived there:

Complete Address	Years	Complete Address	Years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section VI Unlawful Conduct

Have you been charged, or disciplined for any unlawful sexual conduct, child abuse, and/or child sexual abuse? Yes No
If yes, please explain. Use a separate sheet if necessary.

Date & Place _____

Type of Conduct _____

Please provide the name & address of a professional who can verify that you are now suitable for Adventurer leadership.

Professional Reference name, address & phone _____

Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them? Yes No

Have you ever been convicted of any crime including, but not limited to those listed below and/or any crime similar in any manner to those listed below? Yes No

- Indecent assault and battery on a child under fourteen
- Indecent assault and battery on a mentally retarded person
- Indecent assault and battery on a person who has obtained the age of fourteen
- Rape
- Rape of a child under sixteen with force
- Assault with intent to commit rape
- Kidnapping of a child under sixteen with intent to commit rape
- Distribution and trafficking of narcotics or other controlled substances
- Intent to commit any of the above crimes

If yes to any of the above, please explain. Use a separate sheet if necessary.

Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children? Yes No
If yes, please provide and explanation. Use a separate sheet if necessary.

Are you now, or have you ever been subject to any court order involving sexual or physical abuse of a minor, including but not limited to a domestic order or protection? Yes No
If yes, please provide an explanation. Use a separate sheet if necessary.

Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children? Yes No
If yes, please explain. Use a separate sheet if necessary.

Section VII References

Please list below three individuals unrelated to you, who know you well enough to recommend you as Adventurer Staff/volunteer.

	Name	Address	Phone
1.	Pastor/Head Elder or Other	_____	_____
2.	Teacher/Elder or Other	_____	_____
3.	Work Supervisor or Other	_____	_____

I understand that:

- A. the conference/church may deny volunteer service of any person who answers 'yes' to any question in Section VI.
- B. the conference/church may terminate a volunteer if it is circumstances are later discovered that would indicate a 'yes' to any of the questions in Section VI.
- C. the information provided on this form is subject to verification, either by references or background checks.
- D. the conference/church may terminate the volunteer service of any person if that person is found, regardless of when discovered, to:
 - 1. have a history of complaints of abuse of a minor.
 - 2. have resigned, been terminated or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor.
 - 3. have falsified or omitted information in this disclosure statement.
- E. this disclosure statement must be updated yearly.

Section VIII Statement of Accuracy

The above information is accurate to the best of my knowledge. I understand this is strictly a volunteer position, and I will receive no remuneration for services and time volunteered. I authorize investigation of all statements herein, including any checks of criminal records and/or sex offender registry and release the conference/church and all others from liability in connection with same. I also understand that misrepresentations or falsifications herein will result in dismissal of my volunteer service to the club.

Applicant's Signature _____ Date _____

Notes: DUE IMMEDIATELY Please make sure you have checked appropriate boxes in Section VI and signed Section VIII.
 Mail the completed form to:
 Adventurer Ministries
 Southern New England Conference
 PO Box 1169
 South Lancaster, MA 01561-1169

Section VI deals with unlawful conduct. This section has been included to protect the Adventurer Club members from abuse and protect the Seventh-day Adventist church organization from recommending any staff member who has a problem in this area.

If the conference Adventurer director recommends the applicant, none of the information will be forwarded. If the applicant has not been approved, information in Sections I through V will be copied and sent to the local Adventurer director and the 'office use only' box on the top of the front of this form will indicate not recommended or recommended with conditions noted.

When a local club director receives a recommendation from the conference, the Youth Director may not release any specifics but may respond only with 'recommended', 'not recommended', or 'recommended with conditions noted'.

All information on this application will become a permanent record and should include updates. In the event of accusations against the applicant, opportunity should be given for response by the accused. This response also becomes a part of the record.

We regret having to include a section on unlawful conduct, however, understanding the epidemic proportions of this problem, it becomes necessary to maintain records to protect children, parents, Adventurer staff and the church.

Southern New England Conference Driver Information Sheet



PLEASE NOTE: ALL DRIVERS MUST BE AT LEAST 21 YEARS OF AGE AND HAVE A VALID DRIVER'S LICENSE, VEHICLE REGISTRATION, AND VEHICLE INSURANCE. THIS IS MANDATORY FOR ANYONE DRIVING MINORS.

DRIVER INFORMATION

*Conference _____ Church Name _____ Club Name _____

Full Name _____ Date of Birth _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Number(s) Home: _____ Mobile _____

Driver's License Number: _____ State License Issued By: _____ Expiration Date: _____

VEHICLE INFORMATION

Name of Owner _____ Year of Vehicle: _____

Address: _____

Make of Vehicle: _____ Model of Vehicle: _____

License Plate Number: _____ Expiration _____

(If more than one vehicle is to be used, the above information must be provided for each vehicle.)

INSURANCE INFORMATION

Insurance Company: _____

Policy Number: _____ Expiration Date: _____

Address & Phone Number _____

Liability Limits on Insurance Policy _____

CERTIFICATION

I certify that the above information is correct and accurate to the best of my knowledge and ability. I understand that in order to provide transportation for Adventurer/Pathfinder/Youth Group related activities, I must be at least 21 years of age and possess a valid drivers' license, current vehicle registration, and the required insurance coverage.

I understand that when providing transportation for minors, I am acting as an adult chaperone, and will conduct myself accordingly with respect to the expectations and guidelines of the Southern New England Conference of the Seventh-day Adventist Church.

Signature: _____ Date _____

*Conference Codes- BEC-Bermuda GNYC- Greater New York NEC-Northeastern NNEC-Northern New England
 NYC- New York SNEC-Southern New England