



Application Form For Leaders Of Youth And Camping Programs

Merom Conference Center, Indiana-Kentucky Conference, UCC

PO Box 126 Merom IN 47861 800-313-4511 fax 812-356-4002

Confirmation Retreat

Circle month and location: Jan or Feb Merom or Tower Hill

Name _____ Church Name _____ Town _____

Adult's Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Business Phone _____

Have you ever been found guilty, or plead guilty or no contest, to a criminal charge alleging actual or attempted sexual harassment, exploitation, misconduct, physical abuse, or child abuse by you?

Yes _____ No _____

If yes, give a short explanation of the charge.

Has a formal complaint in a civil, ecclesiastical, educational or employment setting ever been made against you alleging actual or attempted sexual discrimination, harassment, exploitation, misconduct, physical abuse, or child abuse by you?

Yes _____ No _____

If yes, give a short explanation of the charge.

Is there any fact or circumstance involving you or your background that would call into question your being entrusted with responsibilities in programs for children or youth sponsored by the Indiana-Kentucky Conference, UCC?

Yes _____ No _____

If yes, please provide a brief explanation.

Are you facing any significant or unusual event in your life that may distract you from your responsibilities as a caretaker of our campers? (examples may include recent change in job or school, major health concern of your own or family member, recent loss of loved one)?

Yes _____ No _____

If yes, are you receiving adequate support from your church, congregation or other community of individuals?

Yes _____ No _____

Release and authorization

I acknowledge that the information provided in the application is true and complete. I authorize the Indiana-Kentucky Conference, UCC, and/or its agents to investigate all statements contained in this application. I also authorize all persons and entities to respond to inquiries concerning me, to supply verification of the information provided in this application and to comment on and state opinions regarding my background and character. To encourage such persons to speak openly and responsibly, I hereby release them from all liability arising from their responses and comments made in good faith and without malice. I understand that a national search of the Sex Offender Database (www.nsopr.gov) will be performed on my name.

Applicant _____ Date _____

Office use only: Date completed _____ Processed by _____

References

Please list three adult references (with one being your pastor) who are not family members and are not persons who also volunteer for youth and camping programs in the United Church of Christ (with the exception of your pastor). These persons should be familiar with your work and/or your volunteer activities. (Pastors--please list your Church Moderator/Council President as one of your references.) **Exceptions to these guidelines must be approved by the Merom office.**

Name _____

Address _____

Zip Code _____

Daytime Phone _____ Evening Phone _____

In what capacity does this person know you? _____

Name _____

Address _____

Zip Code _____

Daytime Phone _____ Evening Phone _____

In what capacity does this person know you? _____

Name _____

Address _____

Zip Code _____

Daytime Phone _____ Evening Phone _____

In what capacity does this person know you? _____