

# Worthy of the Call

## APPLICATION PACKET

(for Volunteers Under the Age of 18)

If you are a youth between the ages of 14-17 and would like to volunteer in any parish or school in the Archdiocese of Baltimore, you must complete the following steps:

1. Complete the “Application for Volunteer Services” to be signed by both youth and parent.

2. Review and complete “Acknowledgement of Review of Archdiocesan Booklets”

Code of Conduct Booklet: <https://www.archbalt.org/wp-content/uploads/2017/10/Code-of-Conduct-Text-FINAL.pdf>

Statement of Policy Booklet: <https://www.archbalt.org/wp-content/uploads/2017/10/AOB-Statement-of-Policy-STV-Revision-FINAL-101717.pdf>

3. Have all **three** of your references complete one of the Reference Letter forms included in the application packet. Reference Requirements:

- Must be 18 years or older
- Family Friend/Neighbor – May not be family member
- Parent or Guardian (only one)
- Teacher/Coach/Employer

4. Attend the Worthy of the Call training session. The session will conclude with signing the Verification Form of Training Attendance. NOTE: All paperwork is included in this packet and must be completed, signed, and returned by mail or dropping off at the Parish Office.



ARCHDIOCESE OF BALTIMORE  
VOLUNTEER ACKNOWLEDGEMENT  
*of Receipt and Review*

I have received and reviewed a copy of the *Code of Conduct for Church Personnel in the Archdiocese of Baltimore*.

I have received and reviewed a copy of *A Statement of Policy for the Protection of Children and Youth* of the Archdiocese of Baltimore

I agree to comply with these Documents

\_\_\_\_\_  
Volunteer Name (**PRINTED**)

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
**\*If above Volunteer is Under 18,  
provide Parent/Guardian Name (PRINTED)**

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

The Archdiocesan booklets are available to download and review at that the following links:

**Code of Conduct Booklet:** <https://www.archbalt.org/wp-content/uploads/2017/10/Code-of-Conduct-Text-FINAL.pdf>

**Statement of Policy Booklet:** <https://www.archbalt.org/wp-content/uploads/2017/10/AOB-Statement-of-Policy-STV-Revision-FINAL-101717.pdf>

Effective November 2017



**ARCHDIOCESE OF BALTIMORE**  
**APPLICATION FOR VOLUNTEER SERVICE**

Revised 2015

**I. Contact Information**

Title: (if applicable):  Br  Dr.  Mr.  Ms.  Rev.  Sr.

\_\_\_\_\_  
 Last Name                                      First Name                                      Suffix

\_\_\_\_\_  
 Other names Previously Used (if applicable)

\_\_\_\_\_  
 Present Street Address

City                                      State                                      Zip  
 (\_\_\_\_\_)                                       Home                                       Work                                       Mobile                                       Other \_\_\_\_\_

Primary Phone  
 (\_\_\_\_\_)                                       Home                                       Work                                       Mobile                                       Other \_\_\_\_\_

Alternate Phone                                      Date of Birth: \_\_\_\_\_ (If Applicant is under 18 years)

\_\_\_\_\_  
 Email Address

Are you a member of a parish in the the Archdiocese of Baltimore?  Yes  No  
 If yes, how long? \_\_\_\_\_ Parish Name \_\_\_\_\_ City \_\_\_\_\_

**II. Volunteer Services**

Parish                       Child Care Facility                       School                       Other \_\_\_\_\_

What position(s) are you applying for? \_\_\_\_\_

What interests you about the position(s)? \_\_\_\_\_

What has prepared you for the position(s) for which you are currently applying? \_\_\_\_\_

**III. Volunteer/Work Experience**

Have you ever applied for or served as a volunteer or employee in any parish, school, or institution within the Archdiocese of Baltimore?  
 Yes  No If yes, which location (s): \_\_\_\_\_

Please list your volunteer/work experience with church/civic/non-profit organizations.  
 (Attach additional sheet of paper if necessary)

Organization	Duties	Dates	Contact	Phone

**IV. Archdiocesan Policy**

- Have you ever had your volunteer services or employment terminated by any parish, school, or institution?  Yes  No
- Have you been terminated from volunteer service or employment due to suspected child abuse?  Yes  No
- Have you ever been accused of physically, sexually or emotionally abusing a child or have you ever been accused of neglecting a child?  Yes  No

If you answered YES to any of the above questions, please explain:  
 \_\_\_\_\_  
 \_\_\_\_\_

Reviewed by:  
 \_\_\_\_\_

## V. Education

Please list education, training and/or certifications received that are relevant to the position for which you are currently applying?

All volunteers with substantial contact with minors and/or those who are designated by the Responsible Administrator must complete Section VI.

## VI. References (3 required -- provide one in each category -- must be 18 years or older)

Reference Type	Reference Name	Email Address	Phone	Relationship to you	How long have you known this person
Personal					
Family Member					
Professional/Civic					

## VI. The Archdiocese of Baltimore appreciates your willingness to share your faith, gifts, and skills. Providing safe and secure programs is of utmost importance. The information gathered in this application is designed to help our parishes, schools, and institutions provide the highest quality Catholic programs for the people of our community.

- I have reviewed a copy of the *Code of Conduct for Church Personnel in the Archdiocese of Baltimore*.
- I have reviewed a copy of *A Statement of Policy for the Protection of Children & Youth* of the Archdiocese of Baltimore.
- I understand and agree that false statements and/or omissions regarding past conduct and/or present situations is cause for rejection of my application or dismissal from my volunteer service.
- I agree to observe all of The Archdiocese of Baltimore guidelines and policies for the program in which I am applying.
- I understand that The Archdiocese of Baltimore takes all allegations of abuse seriously. I further understand that The Archdiocese of Baltimore cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of minors or vulnerable adults is grounds for immediate dismissal and possible criminal charges.
- I hereby authorize the Archdiocese and/or the above named organization to conduct a personal and professional background check for the purpose of my application. They may contact references; past and current employers; churches, youth organizations, or agencies where I have provided volunteer service; and any other individual or organization that may have information relevant to my application.
- I hereby release all of the above stated entities and their agents from any and all liability in connection with providing information, investigating or evaluating my application.
- I waive any right that I may have to inspect any information provided about me in connection with this application.
- I have read and understood the above stated information within this release and am signing below of my own free will.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date (MM-DD-YY)

\_\_\_\_\_  
Parent/Guardian Signature (if applicant is under 18 years)

\_\_\_\_\_  
Date (MM-DD-YY)

Parish/School: \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date Submitted: \_\_\_\_\_ Date Approved: \_\_\_\_\_



ARCHDIOCESE OF BALTIMORE  
 OFFICE OF CHILD AND YOUTH PROTECTION  
**REFERENCE CHECK** FOR VOLUNTEERS

**Written Reference**

\_\_\_\_\_ has applied to serve as a volunteer at Church of the Immaculate Conception.

The Archdiocese of Baltimore and Immaculate Conception have a strong commitment to supporting healthy ministry to children and youth. For this reason it is our policy to ask certain questions of all applicants for employment and volunteer work, and of the people whose names are provided as reference. Please check the appropriate response to the following questions.

1. To your knowledge, has the applicant ever been accused of, charged with, or convicted of child abuse?       Yes     No
  
2. To your knowledge, has the applicant ever been terminated from any volunteer service or employment due to suspected child abuse?       Yes     No
  
3. Are you aware of any reason why the applicant should not be placed in a position where he/she will be working with children and youth?       Yes     No
  
4. To your knowledge, is there any reason why applicant should not serve as a volunteer at (name of parish/school).       Yes     No

If yes, please explain:

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This reference must be signed and dated.

Name

Relationship to Volunteer

Date

**PLEASE RETURN THIS FORM TO:**

Grace Brizek  
 Church of the Immaculate Conception  
 200 Ware Ave.  
 Towson, MD 21204  
 410-427-4729  
 gbrizek@theimmaculate.org



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 OFFICE OF CHILD AND YOUTH PROTECTION  
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ARCHDIOCESE OF BALTIMORE  
VERIFICATION FORM TRAINING ATTENDANCE  
*A Statement of Policy for the Protection of Children & Youth*

VERIFICATION

This verifies that \_\_\_\_\_ has participated in training for  
(Name of Participant)

children and youth protection, which was held at \_\_\_\_\_ on \_\_\_\_\_.  
(Site) (Date)

This training was in compliance with *A Statement of Policy for the Protection of Children and Youth*.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Trainer

\_\_\_\_\_  
Date

Please Note: This training is recognized for Catechist and Youth Ministry Certification as  
1 clock hour in Area "B" and 2 in Area "C".

*Please keep a copy of this form for your records.  
Return original to your parish, school, or institution for your employee/volunteer personnel file.  
Thank you!*