



Safe Environment Office Diocese of Amarillo

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Confidential

Date Entered: _____

Diocese of Amarillo Safe Environment Questionnaire For Employees and Volunteers 8/2014

Please Print Clearly

Main Application (Print)

Name: _____
 First Middle Last

Street Address: _____

City/State/Zip: _____
 City State Zip

Length at current address _____ Years _____ Months

Home Phone: _____
 Area Code Number

Work Phone: _____
 Area Code Number

Cell Phone: _____
 Area Code Number

Email Address: _____

Type of Application (Print) *Please check the one that pertains to your ministry.*

Priest: _____ Incardinated in Diocese of Amarillo _____ Extern serving in the Diocese of Amarillo
 Name of Parish or Institution _____

Deacon: _____ Incardinated _____ Extern
 Name of Parish or Institution _____

Candidates for Ordination: _____ Seminarian studying in a Seminary
 _____ Prospective Seminarian on Pastoral year in Diocese of Amarillo
 _____ Deacon Candidate in Formation

Parish / School Employee: Position _____ _____ Full time ___ Part time
 Name of Parish/School _____

Educator: _____ Catholic School Teacher _____ Teacher's Asst/Aid _____ Full time ___ Part time
 Name of School or Parish _____

Diocesan Employee: _____ Chancery Staff _____ Bishop DeFalco Retreat Center
 Name of Position and Department _____

Volunteer: Position _____
 Name of Parish/School _____

References: (Print) *Must list full information to all references*

Professional:

Name (First/Last) _____

Complete Address _____ City _____ State _____ Zip _____

Day time Phone _____

How long have you known this person? _____ Has this person agreed to be a reference? _____

Personal:

Name (First/Last) _____

Complete Address _____ City _____ State _____ Zip _____

Day time Phone _____

How long have you known this person? _____ Has this person agreed to be a reference? _____

Family Member:

Name (First/Last) _____

Complete Address _____ City _____ State _____ Zip _____

Day time Phone _____

How long have you known this person? _____ Has this person agreed to be a reference? _____

Confidential Background Check Information

Please note: Information in this section is only used to obtain criminal records, which are reviewed by a diocesan official in strictest confidence.

- Have you ever been accused of or arrested for physically, sexually, or emotionally abusing a child or an adult, or for the sales and/or possession of drugs?
_____Yes _____No

If yes, please explain _____

- Have you changed your last name in the past 10 years?
_____Yes _____No

If yes, what was your previous last name? _____

- At any time during the past 10 years have you lived in a different state or outside of the United States?
_____Yes _____No

If yes, what state or country did you live in? _____

Social Security Number: _____ - _____ - _____

Driver's License: State _____ Number _____

Date of Birth: Month _____ Day _____ Year _____

Gender: Male _____ Female _____

Selected Sites

Please indicate the city and the name of the parishes/schools with which you would like this application to be registered.

City where Parish / School is located	Name of Parish / School

Declarations

The **Catholic Diocese of Amarillo** appreciates your willingness to share your faith, gifts and skills. Providing safe and secure programs for the Christian faithful is of utmost importance to us. The information gathered in this application is designed to help us provide the highest quality Catholic programs for the people of our diocese.

Please read and initial each of the statements below.

_____ I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application or dismissal from my ministry involvement.

_____ I hereby authorize the **Catholic Diocese of Amarillo** to conduct a personal and professional background check for the purposes of my application at the **Catholic Diocese of Amarillo**. The **Catholic Diocese of Amarillo** may contact any references, past and current employers, church, youth organizations, agencies where volunteer service has been completed, and any individual or organization which might be relevant to my desired position. I hereby release all of the above stated persons from any and all liability for damages that might occur during the **Catholic Diocese of Amarillo's** contact with the individuals for purposes of employment or volunteer services.

_____ I also hereby give complete permission for the **Catholic Diocese of Amarillo** to conduct a criminal background check, arrest records check, abuse registry check, and driving record check for the purposes of my employment or volunteer services.

_____ I understand and agree that information may be obtained from sources that I provided above and that this information will be held confidentially by the **Catholic Diocese of Amarillo** and not revealed to me. I have also read and understood the above stated information within this release and am signing below of my own free will.

_____ I understand that a criminal background check will be conducted prior to and during my service. I authorize investigations of all statements contained in the application.

_____ I agree to observe all of the **Catholic Diocese of Amarillo** guidelines and policies for the program in which I am applying.

_____ I understand that the **Catholic Diocese of Amarillo** has a ZERO TOLERANCE FOR ABUSE and takes all allegations of abuse seriously. I further understand that the **Catholic Diocese of Amarillo** 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 understand that I can withdraw from the application process at any time.

_____ I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of the application to provide employment and/or volunteer services and that refusal to inform the **Catholic Diocese of Amarillo** of the contents of a sealed criminal record will result in the automatic denial of the application.

_____ If there are any concerns regarding the results of my criminal background check, I give the diocesan official reviewing this information permission to present my background check results to the Pastor/Principal/Supervisor and/or Diocesan Review Board for determination and approval of my service to the Catholic Diocese of Amarillo.

_____ My signature indicates that I have read and understand the above.

Do not sign until you have read and initialed the above statements.

Applicant Signature _____

Date: ____ / ____ / ____

Safe Environment Training (Place) _____

Date: ____ / ____ / ____