



Attachment A: Code of Ethics for Volunteers with Vulnerable Populations

This Code of Ethics must be submitted along with the *Application to Volunteer with Vulnerable Populations* and *Authorization for Release of Information* to:

Human Resources Manager, Alfred Street Baptist Church, 325 S. Patrick Street, Alexandria, VA 22314

While serving as an ASBC volunteer, I WILL NOT:

1. Use, possess, or be under the influence of illegal drugs.
2. Use, possess, or be under the influence of alcohol or intoxicating beverages.
3. Smoke or use tobacco products in the presence of children/youth/seniors.
4. Use profanity and other inappropriate language.
5. Mistreat or neglect others: physical abuse, verbal abuse, psychological/emotional abuse, and sexual abuse including inappropriate touching and exposure.

While serving as an ASBC volunteer, I WILL:

1. Treat everyone of all races, religions, cultures, and learning abilities with respect and consideration.
2. Abstain from humiliating or frightening discipline techniques.
3. Be free of physical and psychological conditions that might adversely affect others' health, including, but not limited to fever or contagious conditions.
4. Portray a positive role model by maintaining an attitude of respect, loyalty, patience, integrity, courtesy, tact, and maturity.
5. Do everything in my power to avoid being put in a situation where I am alone with a child other than my own.
6. Report any suspected abuse or neglect immediately to the Church Administrator and/or Human Resources. If someone is in imminent danger, call 911.

I understand that as a prospective ASBC volunteer, I will be subject to a criminal background check.

I understand that allegations or suspicions of abuse are taken very seriously by ASBC and will be reported to the authorities for investigation. ASBC will fully cooperate with any related investigations and will pursue the prosecution of abusers to its fullest extent under the laws of the Commonwealth of Virginia.

I understand that any violation of this Code may be grounds for removal as a volunteer. Being fully aware of the matters contained in the Code of Ethics, I still desire consideration as a volunteer.

| | | |
|--------------------|-----------------------|---------------|
| _____ Signature | _____ Printed Name | _____ Date |
|--------------------|-----------------------|---------------|

| | | |
|----------------|--------------------------|----------------------------|
| _____ Email | _____ Primary Phone # | _____ Secondary Phone # |
|----------------|--------------------------|----------------------------|

| | | |
|------------------------|---------------------------------------|---------------|
| _____ Ministry Name | _____ Ministry Representative Name | _____ Date |
|------------------------|---------------------------------------|---------------|

| | | |
|----------------|--------------------------|----------------------------|
| _____ Email | _____ Primary Phone # | _____ Secondary Phone # |
|----------------|--------------------------|----------------------------|

Attachment B: Application to Volunteer with Vulnerable Populations

This application must be submitted along with the *Code of Ethics for Volunteers with Vulnerable Populations* and *Authorization for Release of Information* to:

Human Resources Manager, Alfred Street Baptist Church, 301 S. Alfred Street, Alexandria, VA 22314

Name _____

Address _____

Primary Phone # _____ Secondary Phone # _____

Email _____

List the ministry or ministries in which you would like to become involved.

Please share any special talents, skills, or relevant prior experience.

Are you a member of ASBC? ____ Yes ____ No

| Have you at any time ever: | YES | NO |
|---|-----|----|
| 1. Been arrested for any reason? | | |
| 2. Been convicted of, or pleaded guilty or no contest to, any crime? | | |
| 3. Engaged in, or been accused of, molestation, exploitation, or neglect or abuse of a child, disabled or elderly person? | | |
| Are you currently: | | |
| 4. On trial or awaiting a trial on any criminal charges? | | |
| 5. Awaiting sentencing for any criminal offense? | | |
| 6. On probation for any criminal offense? | | |
| Are you aware of: | | |
| 7. Having any traits or tendencies that could pose a threat to a child, disabled or elderly person? | | |
| 8. Any reason why you should not work with children, disabled or elderly persons? | | |
| If you answered "yes" to any question in this box, please explain in detail: | | |

REFERENCES (other than relatives)

Please provide at least two character references.

| Name | Relationship | Phone |
|-------|--------------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

APPLICANT'S STATEMENT

I recognize that Alfred Street Baptist Church (ASBC) is relying on the accuracy of the information I provide on the Volunteer Application. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.

I understand and agree that providing false and misleading information on this application is grounds for my immediate dismissal, if I am selected as a volunteer.

I authorize ASBC to contact any person or entity listed on the Volunteer Application, and I further authorize any such person or entity to provide the church with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release the organization and any such person or entity listed on the Volunteer Application from liability involving the communication of information relating to my background or qualifications. I further authorize the church to conduct a criminal background investigation if such a check is deemed necessary.

I have carefully read and understand the ASBC Background Check Policy and Code of Ethics. I agree to abide by them and to protect the health and safety of vulnerable populations assigned to my care or supervision at all times.

I agree to notify the ASBC Human Resources office within 5 business days of being charged with a criminal offense.

| | | |
|--|-----------------------|---------------|
| _____ Signature (Please read this before you sign it.) | _____ Printed Name | _____ Date |
|--|-----------------------|---------------|

HR Use only:

Attached Code of Ethics ____ Yes ____ No

Attached Authorization for Release of Information ____ Yes ____ No

Results received ____/____/____ Prospective Volunteer / Ministry Notified ____/____/____

Alfred Street Baptist Church

301 S Alfred Street
Alexandria, VA 22314



How to use this consent form:

1. List any other names as Alias or Maiden names.
2. If applicant has a common name, please include middle initial or full middle name for identification purposes.
3. Social Security Numbers are used *only for address history and alias name information*. It will **not** affect your credit score nor will it give Alfred Street Baptist Church credit report information.
4. Applicant/Volunteer MUST sign and date *both pages* of this document.



DISCLOSURE AND AUTHORIZATION FOR VOLUNTEERS

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

DISCLOSURE

In connection with your application to volunteer with the ALFRED STREET BAPTIST CHURCH, which may be deemed "employment purposes" under the Fair Credit Reporting Act, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, military records, professional licensure records, drug testing, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying. These reports may contain information concerning the reasons for termination of past employment. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for volunteer services is an investigation into your education and/or employment history conducted by **SecureSearch, Consumer Disputes, 558 Castle Pines Pkwy., #B4-137, Castle Rock, CO 80108, (866) 891 – 1954, www.securesearchpro.com**, or another outside organization. The scope of this notice and authorization is all encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your volunteer service to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION

AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION AND A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize, without reservation, the obtaining of "consumer reports" or "investigative consumer" reports by ALFRED STREET BAPTIST CHURCH at any time after receipt of this authorization and throughout my volunteer service, if applicable. I further authorize and request, without reservation, any present or former employer, school or university (public or private), any law enforcement agency, administrator, state or federal agency, institution, division of motor vehicles, information service bureau, insurance company, consumer reporting agencies, or other persons or agencies to furnish any and all background information requested by **SecureSearch, Consumer Disputes, 558 Castle Pines Pkwy., #B4-137, Castle Rock, CO 80108, (866) 891-1954, www.securesearchpro.com**, another outside organization acting on behalf of the Company, and/or the Company itself. I also agree that a fax, electronic or photocopy of this Authorization with my signature shall be as valid as the original.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

Signature: _____

Date: _____

The following is information required in order for ALFRED STREET BAPTIST CHURCH to obtain a complete consumer report:

| | |
|--|----------------|
| FULL LEGAL NAME (First, Full Middle Name, Last Name) | |
| SOCIAL SECURITY NUMBER* | DATE OF BIRTH* |
| STREET ADDRESS | |
| CITY, STATE, ZIP CODE | |
| DRIVER'S LICENSE NUMBER | ISSUING STATE |
| OTHER OR FORMER NAMES (AKA, Maiden Names, Married Names, Surnames, Etc.) | |
| <hr/> CONSUMER'S SIGNATURE <hr/> DATE | |

* This information will be used for background screening purposes only.

Please list all Counties and States you have lived in since the age of 18.

| County | State | Name Used in County | Date from | Date to |
|--------|-------|---------------------|-----------|---------|
| <hr/> | | | | |
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