

TO MAINTAIN A SAFE ENVIRONMENT

SCREENING PROCESS

I. ALL Applicants for Employment (full and part-time)

--Complete the revised "Application for Employment" form ([on the diocesan website under "Careers"](#))

--For *Viable* Applicants: Once the pastor or principal determine that one or two applicants are viable candidates for the position, the candidates are interviewed. At the time of the interview, the viable candidates fill out the revised "Background Screening Questionnaire." The background checks are then completed only on these viable candidates. The pastor or principal also checks with previous employers and personal references (DOCUMENT the responses on the attached forms).

The Diocesan Human Resources Dept. performs the background checks for all locations:

* Locations participating in the Multi-Parish/School Accounting Program submit requests (i.e. the revised "Background Screening Questionnaire") by mail, e-mail, or fax to the Multi-Parish/School Accountant assigned to your location who will transmit the request to JOSEPH BLAKELEY for processing: jblakeley@dioceseofbmt.org

* All other locations submit requests (e.g. the revised "Background Screening Questionnaire") by mail or e-mail, to JOSEPH BLAKELEY for processing:
jblakeley@dioceseofbmt.org

Results of the background checks are sent to the Pastor / Principal via e-mail by JOSEPH BLAKELEY. These results are securely maintained with the documentation for each applicant. A notification e-mail from JOSEPH BLAKELEY will also be sent to the bookkeeper/secretary/Multi-Parish/School Accountant informing them that results have been sent to the Pastor / Principal.

--Background checks and previous employers & personal references must be completed before an offer of employment is made to an applicant.

[When do background checks expire and have to be re-done? See page 5.]

After hiring:

- Give employee a copy of the revised *Ethical & Responsible Conduct Policies* (on <https://www.dioceseofbmt.org/safe-environment>) and have employee sign the “Acknowledgement of Receipt” form for lay employees (also on website)
- Give employee a copy of the *Social Media Policy* (on diocesan website – Safe Environment) and have them sign the employee “Verification Statement” at the end of the document
- Require the employee to complete virtual safe environment training: *VIRTUS* “Protecting God’s Children” at virtusonline.org
OR provide you with a copy of their “Certificate of Completion” from a previously completed PGC session, either in-person (before COVID) or online (during/after COVID) (unless hired for under 10 hours per week **AND** has no access to children)
 - Recertification is necessary after 5 years and is entirely online
- Open an individual personnel file with all the above employment documentation and maintain in a secured file cabinet in the office. **This file should only be maintained by the Pastor or Principal**

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SCREENING PROCESS

II. All VOLUNTEERS who will have regular access to children & youth

--Complete the revised "Background Screening Questionnaire"
(Attached)

The Diocesan Human Resources Dept. performs the background checks for all locations:

* Locations participating in the Multi-Parish/School Accounting Program submit requests (i.e. the revised "Background Screening Questionnaire") by mail, e-mail, or fax to the Multi-Parish/School Accountant assigned to your location who will transmit the request to JOSEPH BLAKELEY for processing: jblakeley@dioceseofbmt.org

* All other locations submit requests (e.g. the revised "Background Screening Questionnaire") by mail or e-mail to JOSEPH BLAKELEY for processing:
jblakeley@dioceseofbmt.org

Results of the background checks are sent to the Pastor / Principal via e-mail by JOSEPH BLAKELEY. These results are securely maintained with the documentation for each volunteer. A notification e-mail from JOSEPH BLAKELEY will also be sent to the bookkeeper / secretary / Multi-Parish/School Accountant informing them that results have been sent to the Pastor / Principal.

--Background checks must be completed before any person is allowed to volunteer with children & youth.

To obtain clarifications regarding volunteers who must be screened and/or trained please contact the Office of the Chancellor at 409-924-4304 or chancellor@dioceseofbmt.org

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After Accepting the Volunteer:

- Give volunteer a copy of the revised *Ethical & Responsible Conduct Policies* (on <https://www.dioceseofbmt.org/safe-environment>) and have volunteer sign the “Acknowledgement of Receipt” form for lay employees (also on website)
- give volunteer a copy of the *Social Media Policy* (on diocesan website - Safe Environment) and have him/her sign the volunteer “Verification Statement” at the end of the document
- Require volunteer to attend a “Protecting God’s Children” awareness session within 30 days OR provide you with a copy of the “Certificate of Participation” in a PGC session or a “Certificate of Completion” of the on-line recertification.
- Require the volunteer to complete virtual safe environment training: *VIRTUS* “Protecting God’s Children” OR provide you with a copy of their “Certificate of Completion” from a PGC session, either in-person (before COVID) or online (during/after COVID)
 - On-line recertification will be necessary after 5 years
- Maintain all above documentation together for each volunteer in a secured file cabinet in the office - alphabetized for easy access.

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EXPIRATION:

(4-20-2016)

BACKGROUND CHECKS:

1. CREDIT CHECK - repeated every 7 years

[e.g. Clergy, Dept. Heads, Office Directors, Bookkeepers, Volunteer Money Counters]

2. DMV CHECK - repeated every 3 years

[e.g. Clergy, Diocesan staff, Parish/School Employees (except substitutes), Volunteers who drive for the church entity]

3. NATIONAL SEX OFFENDER CHECK - repeated every 7 years

[All Clergy & diocesan-parish-school employees, all volunteers who work with children & youth at least 10x a year or even one concentrated overnight event]

4. STATE CRIMINAL CHECK - repeated every 7 yrs.

[All Clergy & diocesan-parish-school employees, all volunteers who work with children & youth at least 10x a year or even one concentrated overnight event]

SAFE ENVIRONMENT TRAINING (PGC):

Repeated every 5 years – by completing the on-line recertification



(Rev. 7/2014)

BACKGROUND SCREENING QUESTIONNAIRE

Please Print

Confidential

NAME: _____
LAST First Middle Other Names Used/ Alias/ Maiden

ADDRESS: _____
City State Zip

HOME PHONE: _____ CELL: _____ WORK #: _____

DATE OF BIRTH (MM/DD/YEAR): _____ Sex: F M Race: _____

SOCIAL SECURITY # _____ DRIVER'S LICENSE #: _____

Exact Name on Driver's License: _____ (Provide copy of Dr.Lic.) State Expires

Other STATES/COUNTRIES where resided in the past 10 years: _____

1. Have you ever been the subject of an allegation of any type of sexual abuse that was determined to be credible after an investigation? (You are required to answer this inquiry whether or not a criminal conviction arose out of the allegation.) _____ Yes _____ No If yes, please provide in detail the date, the place, and an account of the circumstances of each allegation.
2. If yes, did any judicial proceeding arise out of the allegations? _____ Yes _____ No If yes, please identify the court in which the proceeding was brought and its location, the parties to that proceeding, the docket number of the proceeding, and any judgment or resolution that was entered or reached.
3. Are you under the supervision of any federal, state, or local corrections agency as a result of any allegations of sexual abuse? _____ Yes _____ No
4. Have you ever been convicted of or pleaded guilty/no contest to, placed on probation, given community supervision, or given deferred adjudication for a misdemeanor or felony (other than a parking violation)? _____ Yes _____ No If yes, please state the nature of the offense, the date of the conviction or the entering of the plea, the judgment imposed, the court imposing the judgment and its location, and the docket number of the proceeding.

“I certify that the responses contained in this document are true and complete to the best of my knowledge, and I understand that falsified statements on this document shall be grounds for denial of my application, termination of employment, or removal from participation in all volunteer programs.”

“I authorize investigation of all statements in this document, including civil, criminal, and sex offender background checks, and, if deemed necessary, driving and credit checks. I also authorize future screenings for retention, reassignment, or promotion unless revoked in writing.”

Signature

Date

Parish/School/Entity to which you are applying: _____

City: _____ Position: _____

As an Employee? _____ Volunteer? _____ With Children/Youth? _____ Drive? _____



(Rev. 7/2014)

CUESTIONARIO DE ANTECEDENTES PENALES

Por favor, letra de imprenta

CONFIDENCIAL

Nombre: _____
Apellido Primer nombre Medio Otros nombres/apodos/soltero/a

Dirección _____
Ciudad Estado Código postal

Teléfono del hogar _____ # celular _____

Fecha del nacimiento (mes/día/año) _____ Sexo F M Raza: _____

Seguro social _____ # Licencia para conducir _____ # Estado Vencida

Su nombre, exactamente, como apesé en su permiso de conducir: _____

(Provea copia de su permiso de conducir.)

Otros estados/paises donde ha residido en los 10 años pasados _____

1. ¿Ha sido usted el alegato de algun tipo de abuso sexual que fue determinado creíble? (Usted debe contestar a esta pregunta si hubo o no declaración criminal de culpabilidad por esta acusación.) ___ Sí ___ No
Si contesta sí, por favor, dé en detalle la fecha, el lugar y las circunstancias de cada acusación.
2. ¿Hubo algún procedimiento judicial debido a acusaciones? ___ Sí ___ No Si contesta sí, por favor, identifique la corte en la cual se presentó y su lugar, las personas del litigio, el número de registro del trámite, y cualquier juicio o resolución a que se llegó.
3. ¿Está usted bajo supervisión de alguna agencia de corrección federal, estatal o local como resultado de alguna acusación de abuso sexual? ___ Sí ___ No
4. ¿Ha sido usted alguna vez condenado o declarado culpable o allanado de los cargos, puesto en libertad provisional, ordenado a servicio supervisada a la comunidad, o puesto en suspensión condicional de la persecución penal por alguna mala conducta o delito (otro de violación de estacionamiento)? ___ Sí ___ No
Si contesta sí, por favor, afirme la naturaleza de la ofensa, la fecha de la condena o inicio del del juicio, la sentencia impuesta, la corte que impuso la sentencia y su lugar, y el número de registro del juicio.

“Certifico que las respuestas contenidas en este documento son verdaderas y completas a mi mejor juicio, y entiendo que afirmaciones falsas en este documento serán motivo para negaresta solicitud, terminar el empleo, o separar de la participación en todos los programas voluntarios.”

“Yo autorizo la investigación de las afirmaciones contenidas en este documento, incluyendo comprobar antecedentes de ofensa civil, criminal y sexual, y, si parece necesario, comprobar registros de crédito y de conducción de autos. Al mismo tiempo doy mi autorización para que se hagan investigaciones futuras como en el caso de ser promovido, o cuando cambio de oficina, esto se hará siempre al menos que se exprese lo contra por escrito.”

Firma

Fecha

Parroquia/Escuela/Oficina en donde está aplicando: _____

Ciudad: _____ Puesto: _____

¿Como Empleado(a)? _____ ¿Voluntario? _____ Interacción con niños(as)/jóvenes? _____ ¿Conducir? _____

PREVIOUS EMPLOYER REFERENCE CHECK (Telephone)

(Rev. 10/03)

APPLICANT _____ POSITION: _____

ENTITY CONTACTED _____ PHONE# _____

PERSON CONTACTED _____ TITLE _____

"My name is _____ from _____ Parish. I am making this inquiry regarding _____, who has applied for the position of _____, and has given us your name as a reference. I am inquiring about her/his employment background and job performance with you".
Assure confidentiality.

What were the dates of employment at your company? From _____ to _____

What position did this person hold? _____

What were her/his main job duties and accomplishments? _____

Applicant's strengths? _____

Weaknesses/negative work habits? _____

Attendance record/punctuality? _____

Reliability/honesty? _____

Did personal problems interfere with work performance? _____

Maintain confidentiality? _____

Communication Skills: written, verbal _____

Work under pressure & meet deadlines? _____

Initiative, planning & organizational ability? _____

Interaction with co-workers, supervisors, others? _____

Any concerns about inappropriate behavior with children or adults? _____

Ability to supervise other employees (if applicable)? _____

Ability to prepare/maintain an annual budget (if applicable)? _____

REASON FOR LEAVING: _____

WOULD YOU RE-HIRE THIS PERSON FOR THE SAME POSITION IF SHE/HE RE-APPLIED? _____

Any other comments about this person's employment with you? _____

REFERENCE CHECKED BY: _____ DATE: _____

(Retain this completed form with the application in the personnel file of the employee.)

PERSONAL REFERENCE CHECK (TELEPHONE)

(Rev. 10/03)

APPLICANT _____ POSITION: _____

PERSON CONTACTED _____ PHONE# _____

"My name is _____ from _____ Parish. I am making this inquiry regarding _____, who has applied/ volunteered for the position of _____, and has given us your name as a personal reference." *Assure confidentiality.*

How do you know this person? _____

How long have you known her/him? _____

Describe some of her/his strengths: _____

Weaknesses: _____

Has she/he maintained a stable job or changed jobs frequently in the past? _____

Is she/he dependable/honest? _____

Can she/he maintain confidentiality? _____

Can you say anything about her/his work ethic? _____

Do personal/family problems interfere with employment? _____

What are some of her/his interests? _____

Does she/he get along well with people? _____

Any concerns about inappropriate behavior with children or adults? _____

If you were hiring someone for this position, would you consider her/him as a good candidate? _____

Why or why not? _____

Other specific questions: _____

Any other information that might assist us in making our decision? _____

REFERENCE CHECKED BY: _____ DATE: _____

(Retain this completed form with the application in the personnel file of the employee.)