

**CCCA Camp and Conference Program Employee-Volunteer References/Background and Release Form**

Dear Applicant:

Please complete the attached **Employee-Volunteer Reference and Background Form** and submit it as shown in the footer. Failure to complete all forms may weigh negatively on the Center’s evaluation of your application. Perjury or misrepresentations on any form will be grounds for non-consideration of your application or termination if discovered after being hired.

As a church, we value the safety of children in our care, our employees, volunteers, and the people whom we serve. We want to take prudent measures to protect our human and material resources. Therefore, the Christian Church Capital Area Region mandates that this form be completed by for all employees and volunteers who have unsupervised contact with a child, the elderly, or persons with disabilities, or who serve as an overnight supervisor, caretaker, counselor, or director for youth activities. Because of differing state laws, some positions may require you to complete additional forms for background check authorization.

**Part 1 – Reference Check Information**

Applicant’s First Name		Applicant’s Middle Name		Applicant’s Last Name		Suffix	
Known by any other name(s)?							
Applicant’s Home Address		City		State		Zip	
Previous Address if less than three years		City		State		Zip	
( ) – -				( ) – -			
Applicant’s Daytime Phone				Applicant’s Evening Phone			
MM / DD / YEAR				- -			
Applicant’s Date of Birth *				Applicant’s Social Security Number			
				M ____ / F ____			
Driver’s License Number		Driver’s License State of Issue		Gender*		Race*	
1. Have you ever been the subject of an official disciplinary review for ministerial misconduct by a Regional Commission on Ministry or the General Commission on Ministry in the Christian Church (Disciples of Christ) or other religious organization that have resulted in any of the following?		Yes	No	N/A	4. Have you ever resigned from employment, been asked to resign by official action, or had legal action taken against you based in whole or in part due to any of the following?		
					Yes	No	N/A
Censure					Sexual Harassment		
Suspension of Standing					Sexual Misconduct		
Termination of Standing					Physical Abuse		
2. Are there any disciplinary reviews pending within a legal system or religious or volunteer organization?					Child Abuse		
					Domestic Abuse		
3. Have you ever been the subject of official disciplinary proceedings by another denomination, professional association, or credentialing body that resulted in disciplinary action?					Financial Misconduct		
					Alcohol / Substance Abuse		
					Violation of Ministerial Code of Ethics		
					Other (explain):		
Have you ever plead guilty, been convicted, entered a plea of no contest, had prosecution deferred/adjudication withheld for an crime: Yes _____ No _____ If yes, list below all offenses, including traffic and/or criminal:							
Year	Offense			City	County	State	

**To ensure the safety for all participants and staff of the Camp and Conference Program, please complete this 2-part form of basic information about you. Please mail it to Rev. Lari Grubbs, Regional Minister, CCCA Regional Office, 8814 Kensington Pkwy, Suite 208, Chevy Chase, MD 20815 or by fax to 301-942-8366 or email it to lgrubbs@cccadisciples.org.**

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**Part 2 - References**

Title	First Name	Middle Name	Last Name	Suffix
Organization		Years of Contact	Day Phone	
Address		City	State	Zip
Title	First Name	Middle Name	Last Name	Suffix
Organization		Years of Contact	Day Phone	
Address		City	State	Zip
Title	First Name	Middle Name	Last Name	Suffix
Organization		Years of Contact	Day Phone	
Address		City	State	Zip

By my signature, I certify that the above is true and accurate, and in my judgment there are no other facts or circumstances involving me or any background related to my being entrusted with the responsibilities of volunteer or employee of the church involved in the Camp and Conference Program in the CCCA Region. I acknowledge that the information contained in this Employee/Volunteer References/Background and Release Form is true and complete and that any misrepresentation and/or omission may be grounds for rejection of consideration for a volunteer or employee position or for termination of my position within the CCCA Region. I have been informed that the CCCA Region may procure a governmental or commercial background check for criminal and/or driving and/or sex offenses through information held by any parties, regarding my previous employment, volunteer experiences, criminal history record, record of state, local, or Federal convictions, and driving record. I authorize those persons who receive this Volunteer and Church Personnel Disclosure and Release Form and/or their agents to make inquiries regarding me and my statements contained in this form.

I also authorize all persons, entities, former employees, courts, law enforcement, and other public agencies to respond to inquiries concerning me, to supply verification of the information provided in this form, and to comment and state opinions regarding my background and character. I hereby release all such entities and individuals from all liability and responsibility arising from their doing so. The information received will be kept confidential and will be used only to determine my suitability to serve as a volunteer or paid employee of the CCCA Region working with the Camp and Conference Program. I agree to abide by the policies, procedures, and code of conduct that currently exist or may be amended in the future by the CCCA Region.

Applicant's Signature	Email Address (if any)	Date
Applicant's Printed Full Name	Daytime Phone #	Evening Phone #

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