



# Diocese of Altoona-Johnstown

## Office of Child and Youth Protection

927 S. Logan Boulevard  
Hollidaysburg, PA 16648-2604

Telephone: (814) 695-5579 ext. 2621

Fax: (814) 695-8894

Website: [www.dioceseai.org](http://www.dioceseai.org)

### Youth Protection Application

Primary Location: \_\_\_\_\_ City: \_\_\_\_\_  
*(Parish, School, Diocese Office/Activity)*

Primary Ministry Role: \_\_\_\_\_ Other Roles: \_\_\_\_\_

#### Personal Information

Name: \_\_\_\_\_

Last

First

Middle

Maiden Name/Alias

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

List the name, location and dates of attendance with respect to the last two educational institutions in which you have been enrolled.

*Name of Institutions*

*Date/s Attended*

*Degree/Diploma*

1. \_\_\_\_\_

2. \_\_\_\_\_

Previous home addresses (if any) with applicable dates. Please list at least last two.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all previous experiences involving youth (employment/volunteer):

<i>Location/Address</i>	<i>Phone</i>	<i>Contact person</i>	<i>Type of Work</i>	<i>Dates</i>
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List any gifts, training, education or other factors that have prepared you for work with children/youth.

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List your employers for the past ten years (*please use the back if needed*)

<i>Employer</i>	<i>Street Address</i>	<i>Phone</i>	<i>Contact Person</i>	<i>Dates of Employment</i>
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Please respond Yes or No to the following questions. Any yes answer requires a detailed explanation below.

- Yes No    Have you ever been convicted of a felony?
- Yes No    Have you ever had your driver's license or a professional license revoked or suspended?
- Yes No    Have you been arrested/charged with driving under the influence of alcohol/other substance?
- Yes No    Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?
- Yes No    Is there any fact or circumstance about you or your background that would call into question the advisability of entrusting you with the supervision, guidance, and care of young people?

If you answered yes for any of the above, please explain. \_\_\_\_\_

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Please provide three references other than relatives or present or former employers.

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

- I declare that all statements contained in this form are true and that any misrepresentation or omission is cause for discontinuation of my involvement as an employee or a volunteer.
- I authorize the Diocese of Altoona-Johnstown to conduct personal and professional reference checks as needed. I realize that the criminal record check will be conducted by the Diocese of Altoona-Johnstown or I may be asked to furnish it.
- I hereby release and agree to hold harmless from liability any person or organization that provides information to the Diocese of Altoona-Johnstown and/or the above mentioned Parish/Organization and their employees, officers and directors or any authorized representative of the same as a result of this record.
- My signature indicates that I have read and understood the above statement and am signing below of my own free will. I also understand that the Diocese of Altoona-Johnstown will conduct a background check every five years for the duration of my employment/volunteerism.

\_\_\_\_\_  
Signature of Employee/Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature of Parent if under the age of 18

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Updated June 2018



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## Employee/Volunteer's Code of Conduct

Our children are the most important gifts God has entrusted to us. As an employee or volunteer, I promise to strictly follow the rules and guidelines in this Code of Conduct as well as the Policies for Youth Protection of the Diocese of Altoona-Johnstown as a condition of my providing services to the children and youth of my parish, school, diocesan office and/or program.

### ***As an employee/volunteer, I will:***

- Treat everyone with respect, patience, integrity, courtesy, dignity, and consideration.
- Avoid situations where I am alone with children and/or youth at parish, school and diocese activities, making sure that there are always a sufficient number of chaperones.
- Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.
- Refuse to accept and refrain from giving expensive gifts from/to children and/or youth or their parents/ guardians without prior written approval from the pastor or administrator.
- Report suspected abuse to the Department of Public Welfare: ChildLine. Then inform the pastor, administrator, or appropriate supervisor. I understand that failure to report suspected abuse to civil authorities is, according to the law, a misdemeanor.
- Cooperate fully in any investigation of abuse of children and/or youth.

### ***As an employee/volunteer, I will NOT:***

- Smoke or use tobacco products in the presence of children and/or youth.
- Use, possess, or be under the influence of alcohol or illegal drugs at any time, especially while volunteering.
- Touch a child and/or youth or speak to a child and/or youth in a sexual or other inappropriate manner.
- Use any discipline that frightens or humiliates, ridicules or threatens children and/or youth.

I understand that as an employee/volunteer working with children and/or youth, I am subject to a thorough background check including criminal history. I understand that any action inconsistent with this Code of Conduct, the Policies for Youth Protection of the Diocese of Altoona-Johnstown or failure to take action mandated by this Code of Conduct may result in my dismissal as an employee or removal as a volunteer with children and/or youth.

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Employee/Volunteer's Printed Name

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Employee/Volunteer's Signature

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Date

**DISCLOSURE STATEMENT APPLICATION FOR VOLUNTEERS**  
**Required by the Child Protective Service Law**  
**23 Pa. C.S. Section 6344.2 (relating to volunteers having contact with children)**

I swear/affirm that I am seeking a volunteer position and **AM NOT** required to obtain a certification through the Federal Bureau of Investigation (FBI), as:

- the position I am applying for is unpaid; **and**
- I have been a resident of Pennsylvania during the entirety of the previous ten-year period.

I understand that if I have not been a resident of Pennsylvania during the entirety of the previous ten-year period, but have received certification from the FBI since establishing residency, I must provide a copy of the certification to my employer and am not required to obtain any additional FBI certifications.

I swear/affirm that, if providing certifications that have been obtained within the preceding 60 months, I have not been disqualified from service as outlined below or have not been convicted of an offense similar in nature to a crime listed below under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

I swear/affirm that I have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

I swear/affirm that I have not been convicted of any of the following crimes under Title 18 of the Pennsylvania consolidated statutes or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

Chapter 25	(relating to criminal homicide)
Section 2702	(relating to aggravated assault)
Section 2709.1	(relating to stalking)
Section 2901	(relating to kidnapping)
Section 2902	(relating to unlawful restraint)
Section 3121	(relating to rape)
Section 3122.1	(relating to statutory sexual assault)
Section 3123	(relating to involuntary deviate sexual intercourse)
Section 3124.1	(relating to sexual assault)
Section 3125	(relating to aggravated indecent assault)
Section 3126	(relating to indecent assault)
Section 3127	(relating to indecent exposure)
Section 4302	(relating to incest)
Section 4303	(relating to concealing death of child)
Section 4304	(relating to endangering welfare of children)
Section 4305	(relating to dealing in infant children)
Section 5902(b)	(relating to prostitution and related offenses)
Section 5903(c) (d)	(relating to obscene and other sexual material and performances)
Section 6301	(relating to corruption of minors)
Section 6312	(relating to sexual abuse of children), or an equivalent crime under Federal law or the law of another state.

I swear/affirm that I have not been convicted of a felony offense under Act 64-1972 (relating to the controlled substance, drug device and cosmetic act) committed within the past five years.

I understand that I shall not be approved for service if I am named as a perpetrator of a founded report of child abuse within the past five (5) years or have been convicted of any of the crimes listed above or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

I understand that if I am arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or am named as perpetrator in a founded or indicated report, I must provide the administrator or designee with written notice not later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the Statewide database.

I understand that if the person responsible for employment decisions or the administrator of a program, activity or service has a reasonable belief that I was arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or was named as perpetrator in a founded or indicated report, or I have provided notice as required under this section, the person responsible for employment decisions or administrator of a program, activity or service shall immediately require me to submit current certifications obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of certifications shall be borne by the employing entity or program, activity or service.

I understand that if I willfully fail to disclose information required above, I commit a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position.

I understand that certifications obtained for the volunteering purposes can only be used for that purpose and cannot be used for employment purposes.

I understand that the person responsible for employment decisions or the administrator of a program, activity or service is required to maintain a copy of my certifications.

I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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### Employee/Volunteer's Ministry Reference

*For individuals who are employees/volunteers to be engaged in ministry within the Diocese of Altoona/Johnstown.  
To be completed by a person not related to the applicant.*

Employee/Volunteer Name: \_\_\_\_\_

How long have you known this individual? \_\_\_\_\_

In what capacity have you known this individual? \_\_\_\_\_

Describe this individual's reliability and willingness to continue his/her commitment.

\_\_\_\_\_

Answer yes or no to the following questions. If you answer yes to any question/s, please explain in detail on the reverse side.

- Yes    No   Are you aware of any problems that would limit the individual's ability to fulfill this obligation?
- Yes    No   Are you aware of any problems or concerns that should limit or preclude this individual from working with children and/or youth? If yes, please explain.
- Yes    No   Are you aware of any instance in which the individual's driver's license or other professional license was revoked or suspended?
- Yes    No   Are you aware whether this individual has ever been arrested or charged with driving under the influence?
- Yes    No   Are you aware whether this individual has ever been charged or arrested for sexual misconduct with minors?
- Yes    No   Is there any fact or circumstance about the individual's background that would call into question the advisability of entrusting the individual with the supervision, guidance, and care of children and young people?
- Yes    No   Are you aware of any other information that would bear upon the appropriateness of the individual's involvement in Church activities?

Are you willing to validate this individual's appropriateness for continued ministry?

Yes \_\_\_\_\_ No \_\_\_\_\_

If No, why not?

\_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please return either by email: [coconnor@dioceseaj.org](mailto:coconnor@dioceseaj.org), fax (814) 695-8894 or mail to Diocese of Altoona Johnstown, c/o Children & Youth Protection, 927 S. Logan Blvd., Hollidaysburg, PA 16648 (8.2018)**