

West Virginia Baptist Convention Voluntary Disclosure Statement For Camp Counselors & Volunteers

GENERAL INFORMATION

Name: Last _____ First _____ Middle _____ Birth Date ___/___/___
 Home address: _____ City _____
 State: _____ Zip Code: _____ Social Security # _____
 Other names by which you are known: (i.e., maiden name) _____
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-mail Address: _____ Employer: _____
 Occupation: _____ Business Phone: (____) _____
 School or College: (attended or attending) _____
 Present Church Membership: _____ Pastor: _____
 Driver's License #: _____ State: _____ Expiration Date: ___/___/___

Previous counseling experience:

Camp Location	Grade	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

Certifications: _____

Helpful Skills & Spiritual Gifts: _____

1. Previous residence(s) for last 5 years (include college and home residences):

City _____ State _____ Years _____
 City _____ State _____ Years _____
 City _____ State _____ Years _____

(Continue on a separate sheet if necessary)

2. Why do you wish to serve as a counselor? _____

3. Have you been convicted of a criminal offense? _____ Yes _____ No

If yes, please list: _____

4. Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them? _____ Yes _____ No

If yes, please explain: (use a separate sheet if necessary): _____

Have you ever been disciplined by any Christian Ministry? _____ Yes _____ No

If yes, please explain: (use a separate sheet if necessary): _____



Please attach a one page statement of your faith; including Conversion, Growth, Ministry, and Involvement.

Please list two (2) references and one (1) Pastoral reference:

Name	Address	Phone#	Relationship
_____	_____	(____) _____	_____
_____	_____	(____) _____	_____
Pastoral Reference			
_____	_____	(____) _____	_____

I understand that a background screening report and/or reference checks and/or interviews may include information from public or private sources regarding my character, driving records, criminal history, court records (both civil and criminal), qualifications and experience, work habits, and/or other information relevant to my volunteer service may be obtained in connection with my application with West Virginia Baptist Camp at Cowen (WVBCC).

I understand that, if I am approved for volunteer service by WVBCC, this background check authorization will be kept on file and may be used at any time during my service to procure further information when, in the judgment of WVBCC, such may be necessary.

I hereby release and discharge to the extent permitted by law, WVBCC, its employees, any individual or agency obtaining information for WVBCC, and any personal or professional reference, from any and all claims, damages, losses, liabilities, costs, or other expenses arising from the retrieving, reporting and/or disclosure of information in connection with this background investigation.

I understand that I am volunteering my services and declare in no way shall I be considered an employee or subcontractor or independent contractor of WVBCC.

By signing below, I, _____, have read, understand and consent to the above. I further authorize that a photographic copy or a telephonic facsimile of this document shall be valid for purposes present and future. My signature below certifies that all information I have provided in connection with this background check is true, accurate and complete to the best of my knowledge.

The previous information is correct. I have also read the policy statements and agree to uphold them. I understand:

1. The camp may deny any person who answers any of the questions numbered 3 or 4 above in the affirmative.
2. In applying to be a volunteer the information which I have furnished on this form is subject to verification, which may include a criminal history check and request from a Central Registry of Child Abusers.
3. The camp may terminate the volunteer service of any person:
 - a. Found to have a history of complaints of abuse of a minor and / or
 - b. Found to have resigned, been terminated or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor.

Signature: _____ Date Submitted: ____/____/____

Prior to June 1st, send to: Director of Camping & Youth, PO Box 1019, Parkersburg, WV 26102 or fax to: 304-485-0940.
 After June 1st, send to: Director of Camping & Youth, PO Box 548, Cowen, WV 26206 or Fax to: 304-226-3553