

GOFMC **POLICY and PROCEDURES for Child Sexual Abuse Prevention
AND Background Screening Procedure**

1. The church shall hold regular training sessions for Leaders, Teachers, Workers and Monitors in the area of child sexual abuse prevention.
2. There shall be designated Monitors to patrol the building during church functions where all children (from birth to 21 years of age) are in attendance, or at a minimum, trained Leaders, Teachers, and/or Workers present.
3. There shall be two trained adults in classrooms with children or one adult and the classroom or nursery door OPEN at all times with a Monitor in place as well.
4. Department leaders shall monitor activity in their departments or appoint designated, trained personnel.
5. Children remain the responsibility of their parents during activities where there is no programming specifically designed for them (Lg, social gatherings); they should remain in areas of the church where adult supervision is available. The sponsoring group is responsible to provide adequate supervision.
6. Annually parents will register their children, nursery through fifth grade, for all regularly scheduled Sunday or mid-week classes/activities.
7. Children, nursery through fifth grade, will not be released from their departments except to parents or other persons designated in writing by parents. Children in the nursery will only be released to the parent or other adult designated in writing by a parent.
8. Bathroom policy: (1) no child goes without an adult (2) Open the door and do a quick glance to see if anyone is in the bathroom. (3) Adult waits outside door (4) If wait seems long, open door, but deal with the student from the hallway (5) If young child needs help, leave the bathroom door open, the stall door open, and stay in view.
9. There shall be adult escort for the children from the sanctuary to Children's Church.
10. All leaders, teachers, workers, and monitors of children shall undergo Background and Personnel Screening Procedure given below.

BACKGROUND AND PERSONNEL SCREENING PROCEDURE

1. All leaders, teachers, workers and monitors of children are required to attend the church's training program on sexual abuse prevention or show verification from an accredited school or organization with a formal program for sexual abuse prevention training and that they have completed such training in the past year.
2. All leaders, teachers, workers and monitors, both volunteer and paid employees, working with children shall fill out the Application for Primary Screening Form for Children or Youth Work for GOFMC. All Leaders, teachers, workers and monitors will have reference check forms sent out based on references listed on Application and a minimum of two acceptable references must be returned.
3. The Sr. Pastor and/or designated paid staff member, Director of Discipleship or Children's Ministry Lead will review form, contact references, and do background checks. The Sr. Pastor will conduct personal interviews if there are areas on the completed forms which indicate potential for risk.

Speak up about abuse and neglect. Call 855-444-3911 any time day or night. This new toll-free phone number allows you to report abuse or neglect of any child or adult to the Michigan Department of Human Services.

Michigan
<http://www.michigan.gov>
Toll Free: (855) 444-3911

RISK PREVENTION NOTEBOOKS with reporting details are located near the phone in the church office and the church kitchen.

STEPS TO FOLLOW in reporting child sexual abuse:

- 1) Contact MDHS at # above immediately and they will conduct the investigation. If for any reason you do not reach a person to speak with at this 855-444-3911 number, call 911 and report to the local authorities.
- 2) Next, inform the Sr. Pastor and the Director of Discipleship (DOD) that you have called the MDHS and why you have contacted them.
- 3) The Sr. Pastor (or the DOD in their absence) should contact our insurance carrier.
- 4) Write down all the information you have been given regarding the abuse situation so you can give it to the MDHS representative.
- 5) DO NOT notify the parents/guardian if the abuse potentially involves them. If the abuse does not involve the parents/guardian, then notify them of the report to the MDHS.
- 6) Do not communicate details to any other person(s) not directly involved in the incident. MDHS will contact the appropriate person(s).

Application and Primary Screening Form for Children or Youth -Work Green Oak Free Methodist Church

This application is to be completed by all applicants for any position (volunteer or compensated) involving the supervision or custody of minors. This is not an employment application form. Persons seeking a position in the church as a paid employee will be required to complete an employment application in addition to this screening form. It is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and use our facilities. Please read over the whole application. If, for any reason, you choose not to complete this form you may leave it blank. We will assume that you do not wish to work with children or youth, and there will be no questions asked.

Personal

Name _____
Last First Middle Date

Present address: _____

City _____ State _____ Zip _____

Home phone _____

Years at present address _____

(If less than 5 years, please list previous addresses in the space provided on page 2)

Please indicate the type of child or youth work you prefer _____

Please indicate the date you would be available to begin _____

The disturbing and traumatic rise of physical and sexual abuse of children has claimed the attention of our nation and society. The following policies reflect our commitment to provide protective care of all children, youth, and volunteers who participate in church sponsored activities. Please read over the whole form before you answer any questions. If for any reason you choose not to complete this form you may leave it blank. We will assume you do not wish to work with children or youth, and there will be no questions asked.

1. Adults who have been convicted of either child sexual or physical abuse should not volunteer service in any church sponsored activity or program for children or youth.
2. All adult volunteers working with youth or children are required to participate in the fellowship of Green Oak Church for a minimum of six months.
3. Adult volunteers should observe the "two adult" rule. This requires that adults are never alone with children or youth without an adult partner.
4. Adult volunteers should immediately report any behaviors, which seem abusive or inappropriate to their supervisor.

Please Answer Each Question. Your Response Will Be Kept Confidential

1. As a church volunteer, do you agree to observe all church policies regarding working with youth or children? _____Yes _____No
2. Have you ever been convicted of or plead guilty to a crime? _____Yes (please describe, attach another sheet if necessary) _____No

Adult survivors of childhood sexual or physical abuse need the love and acceptance of this church family. Individuals who have such a history should discuss their desire to work with children or youth with one of the pastoral staff prior to engaging in any volunteer service. If you feel that it might better serve the children or the youth if you were to get some counseling on this issue, please check the box here and the Sr. Pastor will contact you.

Yes, contact me

Previous addresses

Church History and Prior Youth Work

Name of the church of which you are a member: _____

List (name and address) other churches you have attended regularly during the past five years: _____

List all previous church work involving youth or children (List each church's name and address, type of work performed and date.) _____

List all previous non- church work involving youth or children (list each organization's name and address, type of work performed and dates) _____

List any gifts, callings, training, education, or other factors that have prepared you for children or youth work: _____

Personal References (not former employers or relatives)

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Applicant's Statement

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children or youth work. In consideration of the receipt and evaluation of this application by Green Oak Free Methodist Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Bylaws and policies of Green Oak Free Methodist Church, and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and understand.

Applicant's Signature _____ **Date** _____

(Do not write below this line)

I hereby state that I performed a criminal background check on the above individual on _____ the results of which were: _____

_____.

A driving records check was _____ was not _____ performed. The results were: _____

_____.

Name _____

Request for Criminal Records/Driving Records Check Authorization

I hereby acknowledge and give my permission for Green Oak Free Methodist Church to conduct a Criminal records check and if my position requires transportation of minors conduct a driving records check. I understand that this personal information sheet will be kept confidential and will be destroyed after the checks are completed.

Signature _____ Date _____

Print full name _____

Print maiden name if applicable _____

Print all aliases _____

Date of birth _____

Place of birth _____

Social Security Number _____

If the position you are applying for would include transporting minors please answer the following question.

Do you have a current driver's license?

_____ Yes If yes, please list your driver's license number _____

_____ No

Green Oak Free Methodist Church Reference Form

_____ is applying to become a volunteer worker with the Children's /Youth Ministry at the Green Oak Free Methodist Church of Brighton, MI, and has given your name as a personal reference. This staff position places the person in close contact with children/youth, and we want to ensure that this relationship will be a healthy one. Please complete the form below and use the enclosed envelope to send us your evaluation of this person's character and integrity. Your response will remain confidential.

1. Describe your relationship with this person:
2. How long have you known this person, and in what capacity?

Please use the following scale to respond to questions 3 through 6:

1 – low 2 – below average 3 – average 4 – very good 5 – excellent

How would you rate his/her ability in the following areas:

3. Emotional maturity? _____
4. Following through with commitments? _____
5. Ability to relate to children? _____ to youth? _____
6. Spiritual maturity? _____

What are this applicant's strengths?

Do you have any concerns about this person working with children or youth?

Your Name _____ Today's Date _____

Your Address _____ Your Phone: _____

Thank you for taking the time to complete and return this reference form in the enclosed envelope.

Return this form to : Church Secretary
Green Oak Free Methodist Church
10111 Fieldcrest Drive
Brighton, MI 48116

If you have any questions regarding this reference, please call the Director of Discipleship at 734-449-2870.

GO Team Kid Volunteer Agreement

GO Team Kid exists:

- To provide a safe, loving environment for children to learn about God, the Bible and Christian life principles.
- To give every child many opportunities to make a commitment to Jesus Christ as their Savior.
- To have open communication to share concerns between staff, parents and children.

After observation of the ministry, spending time in prayer, and discussing with my family the commitment involved with being a part of GO Team Kid, I agree to the following as a volunteer:

- I acknowledge the Lordship of Jesus Christ in my life and I have a growing relationship with God through personal prayer and reading of scripture.
- I acknowledge that corporate worship is vital in my spiritual life; therefore, I will attend our Sunday morning worship service faithfully when I am not scheduled as a volunteer.
- I understand the importance of serving in the local church and will support the church's ministry and its leaders in a spirit of unity.
- I am committed to choices and a lifestyle that are Godly, knowing that my lifestyle is a model for the students.
- I will be prepared to lead all students to accept Christ as personal Savior and to lead students in spiritual growth.
- I will prayerfully prepare in advance for the lessons that are my responsibility.
- I will make every attempt to attend all GO Team Kid staff/volunteer meetings and will complete the annual training requirements.
- I understand, agree with and will abide by the mission of GO Team Kid, the mission of Green Oak Free Methodist Church and the doctrines of the Free Methodist Church denomination.
- Because I am making a significant commitment and my presence is important, I agree to be punctual and reliable in the program(s). I also agree to communicate with a GO Team Kid Director if I will be absent when scheduled.

Signature of Volunteer

Printed Name of Volunteer

Date

11/15/18



Green Oak Free Methodist Church

Love God, Love Others, Reach the Lost

6.2 Classroom/Activity Policy	Revision: A
	Revision effective date: 2/22/18

1. **Description:** To have open communication to share concerns between staff, parents and children.
2. When a child experiences any of the following difficulties during a Church activity, the staff will notify the parent or adult responsible, asking them to come to the classroom.
 - A. Illness
 - B. Injury
 - C. Personal hygiene needs
 - D. Any situation in which a child needs their parent's /adult's presence.
3. The parent/adult responsible may choose to stay with the child in the classroom/activity site or take the child away from the classroom/activity site.