



Volunteer Ministry Application

Thank you for volunteering your time and talents to serve in ministry in the Diocese of Fort Worth. Your completed application will be reviewed carefully, but its receipt does not imply that you will be accepted as a volunteer minister. The Diocese of Fort Worth, in its sole discretion and (where applicable) in consultation with the parish/school, decides who may officially minister in the Catholic Church. Incomplete answers on this application may result in no offer of ministry.

After this application is reviewed, an interview will be scheduled with the appropriate ministry leader or other designated person. All volunteers participating in an official ministry within the Diocese of Fort Worth are required to attend a Safe Environment Awareness Session and agree in writing to abide by the Diocesan Code of Conduct & Behavior Standards for All Clergy, Religious and Lay Ministers. The last step in the review process of your application for volunteer ministry requires you to successfully complete a Criminal Background Check.

Your signature and initials in the appropriate places on this application are required prior to processing your application. Please complete all 4 pages of this application form and return it to your parish/school Safe Environment Coordinator.

I. Contact & Personal Information

Full Legal Name (printed): _____

Maiden Name (if applicable): _____

Nickname(s): _____

Street Address: _____

City, State, Zip Code: _____

Phone: Day _____ Evening _____

E-mail: _____

Date of Birth (Month/Day/Year): ____/____/____

Driver License: State _____ Number _____

Check here if you have had a criminal records check with the Diocese of Fort Worth in the past three years. Approximate date of background check: _____

II. Volunteer Experience

Please list your volunteer experiences with current and previous dioceses, parishes and church organizations, with other civic or non-profit organizations, and particularly volunteer experience with youth organizations (*use additional sheet if needed*).

Organization	Duties	Dates	Contact	Phone/Email

III. References

Reference Name Professional/Civic/Personal (not family members)	Address City, State, Zip	Daytime Phone & Email	How long have you known this person?	Has this person agreed to provide a reference?

IV. Questions (use additional pages if necessary)

1. What parish are you currently attending and/or registered with? _____
2. For **liturgical** volunteers only
 - a. Are you a Catholic in good standing? Yes No
 - b. Have you received all of your sacraments? Yes No
 - c. If married, were you married by a priest or deacon in the Catholic Church? Yes No
3. Has any parish, school, facility, organization, or faith community terminated or refused your volunteer service? Yes No If, yes, please explain? _____

4. Have you ever been accused of physically, sexually, or emotionally abusing a child? Yes No
 If, yes, please explain? _____

5. Have you ever had your parental rights restricted, suspended or terminated? Yes No If, yes, please explain? _____
6. Has a civil or criminal complaint ever been filed against you alleging physical or sexual abuse or sexual harassment? Yes No If, yes, please explain? _____

7. What is the volunteer role for which you are applying? _____
8. Why are you applying for this volunteer role? _____

9. What gifts and talents do you bring to serve in this role? _____

10. List your previous training and education that will enhance your ability to serve.

11. What do you intend to accomplish by your involvement? _____

12. Are there any time constraints that affect your ability to volunteer throughout the next year?

Yes No If, yes, please explain? _____

V. Educational history

Dates (Start with most recent)	School Name & Address City, State Zip	Type of School	Name of Program/Degree	Program Completed?
Started ____/____/____ Ended ____/____/____				
Started ____/____/____ Ended ____/____/____				
Started ____/____/____ Ended ____/____/____				

VI. Employment history

Dates of Employment (Start with most recent)	Company Name & Address, City, State Zip	Immediate Supervisor Name & Phone	Position Held	Reason for Leaving
Started ____/____/____ Ended ____/____/____				

Cont. Employment History

Dates of Employment	Company Name & Address, City, State Zip	Immediate Supervisor Name & Phone	Position Held	Reason for Leaving

Started ___/___/___				
Ended ___/___/___				
Started ___/___/___				
Ended ___/___/___				

VII. In addition to English, are you fluent in any other languages? (Check all that apply)

Spanish Vietnamese Sign Language Other (specify) _____

VIII. Authorization for Background & Reference Checks

The Diocese of Fort Worth appreciates your willingness to share your faith, gifts and skills. The information gathered in this application is designed to help us assure that we are providing the highest quality programs for the people of our community. **Please read and check each box of the statements below.**

- I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application, or dismissal from my volunteer involvement.
- I hereby authorize the Diocese and/or its agent to conduct a personal and professional background check for the purposes of my application to serve as a volunteer. At this time, and until informed in writing to the contrary, I hereby authorize and direct the release to the Diocese and/or the authorized agent of the Diocese any information concerning my employment, education, criminal record, allegations of abuse or sexual harassment, and/or any other relevant information.
- I grant the Diocese permission to conduct a criminal background check, arrest records check, abuse registry check, and driving record check for the purposes of reviewing my application to be a volunteer and to investigate all statements contained in the application.
- I agree to conduct myself according to the Code of Conduct and other policies of the Diocese.
- I hereby waive any right that I may have to inspect any information provided about me by references or any representative of organizations and entities previously mentioned in this application or a personal interview.
- I understand that the Diocese has a ZERO TOLERANCE Policy for child abuse and takes all allegations of child abuse seriously. I further understand that the Diocese cooperates fully with the authorities to investigate all cases of alleged child abuse. Abuse of minors or vulnerable adults is grounds for immediate dismissal and possible criminal charges.
- I understand that I can withdraw from the application process at any time.
- I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may result in denial of this volunteer application and that refusal to inform the Diocese of the contents of a sealed criminal record will result in the automatic denial of the application.
- My signature indicates that I have read and understood the above stated information within this release and am signing below of my own free will.

Applicant Signature: _____

Date: ___/___/___

Printed Name: _____